

PLUMBING PERMIT WORK SHEET

CONTRACTOR: _____

CUSTOMER/OWNER: _____

JOB ADDRESS: _____

Enter number in each applicable space. For each listing that does not apply, leave the space blank.

Number of new or relocated plumbing fixtures, traps, or sets
of fixtures on one trap(including water & drainage piping) _____

Number of mobile home installations _____

Sewer having to be installed, replaced or repaired _____

Number of water heaters _____

Gas piping system/test _____

Water lines to be installed, replaced or repaired _____

Water piping for water treating equipment _____

Number of backflow prevention devices _____

Number of grease/grit traps _____

Number of sewer backwater valves _____

Number of sewer cleanouts _____