

CITY OF LAKE VIEW INSPECTION SERVICES
APPLICATION FOR PLUMBING PERMIT

(This box for Clerk's use only)

Date _____ Permit# _____

A PERMIT IS REQUESTED TO INSTALL, REPAIR OR REPLACE PLUMBING LOCATED

AT: _____
 (PHYSICAL ADDRESS OF JOB SITE)

BY: _____ PHONE# _____
 (PLUMBING CONTRACTOR) (NAME OF BUSINESS AS SHOWN ON BUSINESS LICENSE)

FOR: _____
 (NAME OF BUILDING CONTRACTOR/OWNER/OCCUPANT)

(IF NO PHYSICAL ADDRESS AVAILABLE PLEASE PROVIDE)

LOT: _____ BLOCK: _____ SECTOR: _____

SUBDIVISION: _____

TAX PARCEL ID#: _____

BUILDING WATER SERVICE:

- FROM MAIN TO METER
- FROM METER TO BUILDING
- WATER DISTRIBUTION IN BUILDING

TYPE OF OCCUPANCY:

- RESIDENTIAL
- COMMERCIAL/INDUSTRIAL

TYPE OF CONSTRUCTION:

- NEW INSTALLATION
- REPLACE EXISTING/REPAIR

SEPTIC TANK:

- CONNECTION TO SEPTIC TANK
- DISCONNECTION FROM SEPTIC TANK

TYPE OF CONSTRUCTION:

- NEW CONSTRUCTION
- EXISTING BUILDING/ADDITION

OTHER _____

IS ANY EXCAVATION TO BE DONE WITHIN ANY PUBLIC WAY: YES NO
 (SIDEWALK, STREET, ALLEY, ETC) (CIRCLE)

I HEREBY CERTIFY: All information given herein is true and correct to the best of my knowledge. I assume all responsibility for the PLUMBING work performed on this job and hold harmless any claims against the City of Lake View, its council and/or its agencies relating to this PLUMBING job for which this permit is issued. I agree to comply with all City of Lake View ordinances, State and Federal laws regulating building construction; that I am the owner or authorized to act as the owner's agent for the herein described work; all work to be performed shall meet or exceed all applicable codes.

 Signature Printed Name Date

PLUMBING PERMIT COST: \$50.00 plus issuance fee and total cost of work unless cost is included in building permit fees.

APPROVED BY: _____ **DATE:** _____