

**Delaware General Health District**

**1 W. Winter Street; P.O. Box 570**

**Delaware, Ohio 43015-0570**

(740) 368-1720 Fax (740) 368-1736

# Plumbing Permit



Permit # \_\_\_\_\_ - \_\_\_\_\_

Receipt # \_\_\_\_\_ / /

**Job site located at:**

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Township \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot # \_\_\_\_\_ New \_\_\_\_\_ Remodel \_\_\_\_\_

**Plumbing Contractor**

Contractor: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone# \_\_\_\_\_ Registration # \_\_\_\_\_

**Property Owner information**

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City/ State/ Zip: \_\_\_\_\_

Phone # \_\_\_\_\_

Number of Residential Fixtures	Description	Number of Commercial Fixtures
	Air Admittance Valve	
	Backflow Device	
	Bar Sink	
	Bath Tub	
	Commercial Sink	
	Dish Washer	
	Drinking Fountain	
	Floor Drain/ Hub Drain	
	Garbage Disposal	
	Grease Removal Device	
	Inside Conductor	
	Kitchen Sink	
	Laundry Sink	
	Lavatories (Bath Sink)	
	Oil Interceptor	
	Sand Trap	
	Shampoo Bowl	
	Shower	
	Slop Sink	
	Soda Fountain	
	Sump Pump	
	Urinals	
	Washing Machine	
	Water Closet (Toilet)	
	Water Heater	
	Other	
	<b>Total Fixtures</b>	
<b>X \$15.00</b>	<b>Per Fixture Fee</b>	<b>X \$20.00</b>
<b>+ \$50.00</b>	<b>Application Fee</b>	<b>+ \$200.00</b>
	<b>Commercial Plans Review</b>	
	1-20 Fixtures + \$ 50.00	
	21-40 Fixtures + \$100.00	
	41-60 Fixtures + \$150.00	
	61 + Fixtures + \$200.00	
<b>\$</b>	<b>Grand Total</b>	<b>\$</b>

**Underground Inspection**

Approved \_\_\_\_\_ / / \_\_\_\_\_

Disapproved \_\_\_\_\_ / / \_\_\_\_\_

**Top Out Inspection**

Approved \_\_\_\_\_ / / \_\_\_\_\_

Disapproved \_\_\_\_\_ / / \_\_\_\_\_

**Final Inspection**

Approved \_\_\_\_\_ / / \_\_\_\_\_

Disapproved \_\_\_\_\_ / / \_\_\_\_\_

**I here by certify that all work will be done in accordance with the State and Local regulation.**

\_\_\_\_\_  
Applicant's Signature Date

\_\_\_\_\_  
Issued By Date

Comments \_\_\_\_\_

**PERMIT MUST BE POSTED ON SITE**  
**SEE REVERSE SIDE FOR FURTHER INSTRUCTION**

**NO PART OF ANY PLUMBING SHALL BE COVERED UNTIL IT HAS BEEN INSPECTED, TESTED, AND APPROVED.**

Call for final inspection when job is complete and before occupancy.

**RESIDENTIAL INSPECTION FEES:** There will be a \$50.00 charge for each partial inspection and \$50.00 charge for failed inspection. A partial inspection is any underground, rough, or final inspection that involves a portion or portions of the full plumbing system.

**COMMERCIAL INSPECTION FEES:** There will be a \$50.00 charge for each partial inspection and \$75.00 charge for failed inspection. A partial inspection is any underground, rough, or final inspection that involves a portion or portions of the full plumbing system.

**ALL FEES MUST BE PAID PRIOR TO SCHEDULING FINAL INSPECTION**