



# Delaware Public Health District

Dedicated to your health

EH@DelawareHealth.org | (740) 368-1700

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

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

## PLUMBING PERMIT *Commercial*

### Job site located at:

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

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Model Name: \_\_\_\_\_ [ ] New [ ] Remodel

### Plumbing Contractor

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

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

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

Phone: \_\_\_\_\_

Registration #: \_\_\_\_\_

### Property Owner Information

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

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

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

Phone: \_\_\_\_\_

Description	Number of Fixtures
Air Admittance Valve	
Lavatory (Bath Sink)	
Water Closet (Toilet)	
Bathtub	
Shower	
Kitchen Sink	
Dish Washer	
Garbage Disposal	
Washing Machine	
Laundry Sink	
Floor Drain/Hub Drain	
Water Heater	
Backflow Device	
Sump Pump/Ejector Pump	
Urinals/Bidet	
Mop Sink	
Bar Sink	
Shampoo Bowl	
Commercial Sink	
Soda Fountain	
Drinking Fountain	
Inside Storm Conductor	
Oil Interceptor	
Sand Trap	
Grease Removal Device	
Other	
<b>Total Fixtures</b>	
<b>Per Fixture Fee</b>	<b>\$30.00</b>
<b>Commercial Plans Review</b>	
1-20 Fixtures <b>\$55</b>	
21-40 Fixtures <b>\$110</b>	
41-60 Fixtures <b>\$165</b>	
61+ Fixtures <b>\$275</b>	
<b>Application Fee</b>	<b>\$160.00</b> Includes first fixture
<b>Water Heater Replacement</b> City of Delaware and Powell Only	<b>\$75.00</b>
<b>Grand Total</b>	

### Underground Inspection:

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

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

### Top Out Inspection:

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

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

### Final Inspection:

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

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

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

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

**PERMIT MUST BE POSTED ON SITE**

SEE REVERSE SIDE FOR FURTHER INSTRUCTIONS