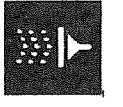


PLUMBING SUBCODE
TECHNICAL SECTION



Date Received _____ R/N
 Date Issued _____ R/O
 Permit # _____ C/N
 _____ C/O

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE.

Work Site Location _____

Owner _____

Address _____

Telephone (_____) _____

Contractor _____

Address _____

Telephone (_____) _____ Fax (_____) _____

Lic. No. _____ PA.HIC # _____

Federal Emp. No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Well _____

Est. Cost of Plumbing Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW _____ INSPECTIONS _____

No Plans Required _____ Type: _____

Joint Plan Review Required: _____ Slab _____

Building Electric _____ Rough _____

Fire Elevator _____ Water _____

Plumbing Plans Approved _____ Sewer _____

Date: _____ Fixtures _____

Approved by: _____ Gas Equipment _____

_____ Gas Piping _____

SUBCODE APPROVAL _____ Solar _____

CO CCO CA _____ TCO _____

Date: _____

Approved by: _____

D. TECHNICAL SITE DATA (List of all fixtures.)

NO. _____ FEE (Office Use Only) \$ _____

_____ FUTURE/EQUIPMENT _____

_____ Water Closet _____

_____ Urinal/Bidet _____

_____ Bath Tub _____

_____ Lavatory _____

_____ Shower _____

_____ Floor Drain _____

_____ Sink _____

_____ Dishwasher _____

_____ Drinking Fountain _____

_____ Washing Machine _____

_____ Hose Bibb _____

_____ Water Heater _____

_____ Fuel Oil Piping _____

_____ Gas Piping _____

_____ Steam Boiler _____

_____ Hot Water Boiler _____

_____ Sewer Pump _____

_____ Interceptor/Separator _____

_____ Backflow Preventer _____

_____ Greasetrapp _____

_____ Sewer Connection _____

_____ Water Service Connection _____

_____ Stacks _____

_____ Other _____

_____ Other _____

_____ Other _____

_____ Other _____

Administrative Surcharge \$ _____

UCC Inspection \$ _____

PA L&I \$ _____

TOTAL \$ _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature _____