

THE TOWNSHIP OF PENN PLUMBING PERMIT APPLICATION FORM

To be filled out by owner or Master Plumber:

Owner: _____ Phone Number: _____

Location: _____

Structure type and proposed use: _____

Fill in or check applicable below:

New system: _____ Addition to existing system: _____

Inspections required: _____ Rough: _____ and/or Final: _____

Number of fixtures: _____ Master Plumber: _____

Master Plumber Phone # _____

Contractor for lateral installation: _____

The plan must be submitted and approved before permit is issued.

Notification of approval or disapproval of the permit application will be given by the Township of Penn within seventy-two (72) hours after request is made.

List of fixtures and how many of each:

Signature of Applicant (Owner or Agent)

To be completed by Township:

Approved for issue by: _____ Fee required: \$

Date: _____ Title: _____ Permit No. _____