



BOROUGH OF TOPTON

PLUMBING PERMIT APPLICATION

DATE _____

PERMIT NUMBER _____

PROPERTY INFORMATION:

Property Address: _____

Property Owner: _____ Phone: _____

Address (if different from above): _____

Description of Building: _____

CONTRACTOR INFORMATION:

Company Name: _____ Cont. Lic. No. _____

Address: _____

Contact Person: _____ Phone: _____

PROPOSED WORK SPECS:

| Type of Equipment | Quantity |
|----------------------------|----------|
| STACKS | |
| SINKS | |
| BATHS | |
| WATER CLOSET | |
| LAVATORY | |
| TANK AND HEATER | |
| LAUNDRY TRAY | |
| WATER DISTRIBUTION SYSTEMS | |
| FLOOR DRAINS | |
| SEWAGE EJECTOR | |
| FOUNTAIN(DRINKING) | |
| SUMP | |
| SHOWERS | |
| URINAL | |
| CATCH BASIN | |
| DISHWASHING MACHINE | |
| HUMIDIFIER | |
| GARBAGE GRINDER | |
| WASHING MACHINE | |
| SPECIAL WASTES | |
| RAINWATER LEADERS | |
| MISCELLANEOUS FIXTURES | |

Anticipated Completion Date: _____ Estimated Cost: _____

VERIFICATION OF APPLICATION:

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent. I hereby attest to the information on this application to be accurate and true to the best of my ability. I agree to conform to all applicable laws of the Borough of Topton and certify that the code official or his authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

Signature of Applicant/Authorized Agent: _____

Print Name of Applicant: _____ Application Date: _____