

APPLICATION FOR PLUMBING PERMIT, TAPS & INSPECTIONS
 DEPARTMENT OF PUBLIC SERVICE
 CITY OF ST. MARYS, OHIO

PERMIT NO.: _____
 DATE: _____

THE UNDERSIGNED HEREBY APPLIES FOR A PERMIT TO DO PLUMBING WORK AND FOR AN INSPECTION OF SAME AT THE FOLLOWING LOCATION, AND IN ACCORDANCE WITH THE CURRENT ORDINANCES AND RULES AND REGULATIONS OF THE CITY OF ST. MARYS, OHIO, AND CHAPTERS 4101:2-56 TO 4101:2-69 OF THE PLUMBING CODE SECTION OF THE OHIO BASIC BUILDING CODE OR ITS LATEST REVISIONS.

TO BE COMPLETED BY LICENSED PLUMBER
 (EXCEPTION: SEE CHAPTER 1337, ST. MARYS CODE OF ORDINANCES)

APPLICANT'S NAME: _____
 ADDRESS: _____
 LICENSE NO.: _____ BOND EXPIRATION DATE: _____

LOCATION OF WORK

ADDRESS: _____ LOT: _____ SUBD.: _____
 BUILDING: NEW _____ EXISTING _____ USED FOR WHAT PURPOSE _____
 NO. OF STORIES _____ BASEMENT _____ SLAB _____ CRAWL SPACE _____

OWNER'S NAME: _____
 ADDRESS: _____

TYPE OF WORK
 (INDICATE NEW OR RECONSTRUCTION)

PROJECT DESCRIPTION: _____
 INTERIOR PLUMBING: _____ WATER SERVICE: _____
 SEWER CONNECTION: SANITARY: _____ STORM: _____
 SIZE OF BUILD. SEWER: _____ MATERIAL: _____
 SIZE OF BUILD. DRAIN: _____ MATERIAL: _____
 SIZE OF MAIN VENT: _____ MATERIAL: _____
 SIZE OF STORM SEWER: _____ MATERIAL: _____
 SIZE OF WATERLINE: (INSIDE) _____ MATERIAL: _____
 SIZE OF WATERLINE: (OUTSIDE) _____ MATERIAL: _____

WATER CLOSETS		LAVATORIES		DISH WASHER	
SINKS		BATHTUBS		GARBAGE DISPOSAL	
LAUNDRY TRAYS		FLOOR DRAINS		DOWNSPOUTS	
SHOWERS		WASHING MACHINE		SUMP PUMP	
TOTAL OF TRAPS AND FIXTURES					

STATE BUILDING PERMIT NO. (IF APPLICABLE) _____

INSTRUCTIONS

THIS FORM MUST BE PROPERLY COMPLETED AND RETURNED TO THE OFFICE OF THE DIRECTOR OF PUBLIC SERVICE AND SAFETY OF THE CITY OF ST. MARYS AND A PERMIT ISSUED PRIOR TO THE BEGINNING OF ANY WORK. THIS PERMIT SHALL BE ACCOMPANIED BY A FEE CALCULATED UPON THE FOLLOWING BASIS:

APPLICATION FOR PERMIT ----- RESIDENTIAL ----- \$10.00 _____
 APPLICATION FOR PERMIT ----- COMMERCIAL ----- \$20.00 _____
 EACH TRAP OR FIXTURE ----- \$1.00 _____

SEWER CONNECTION (NEW OR RECONSTRUCTED):
 SANITARY ----- \$20.00 _____
 STORM ----- \$20.00 _____
 VILLA NOVA SEWER DISTRICT FEE (IF APPLICABLE) ----- \$ _____
 ST. MARYS SEWER DISTRICT FEE ----- \$ _____
 SEWER ASSESSMENT OR FRONT FOOTAGE FEE ----- \$ _____

WATER SERVICE (RESIDENTIAL & COMMERCIAL) METER SIZE _____
 WATER TAP FEE ----- \$ _____
 LABOR FEE ----- \$ _____
 EQUIPMENT FEE ----- \$ _____
 MATERIAL FEE ----- \$ _____
 WATER ASSESSMENT OR FRONT FOOTAGE FEE ----- \$ _____

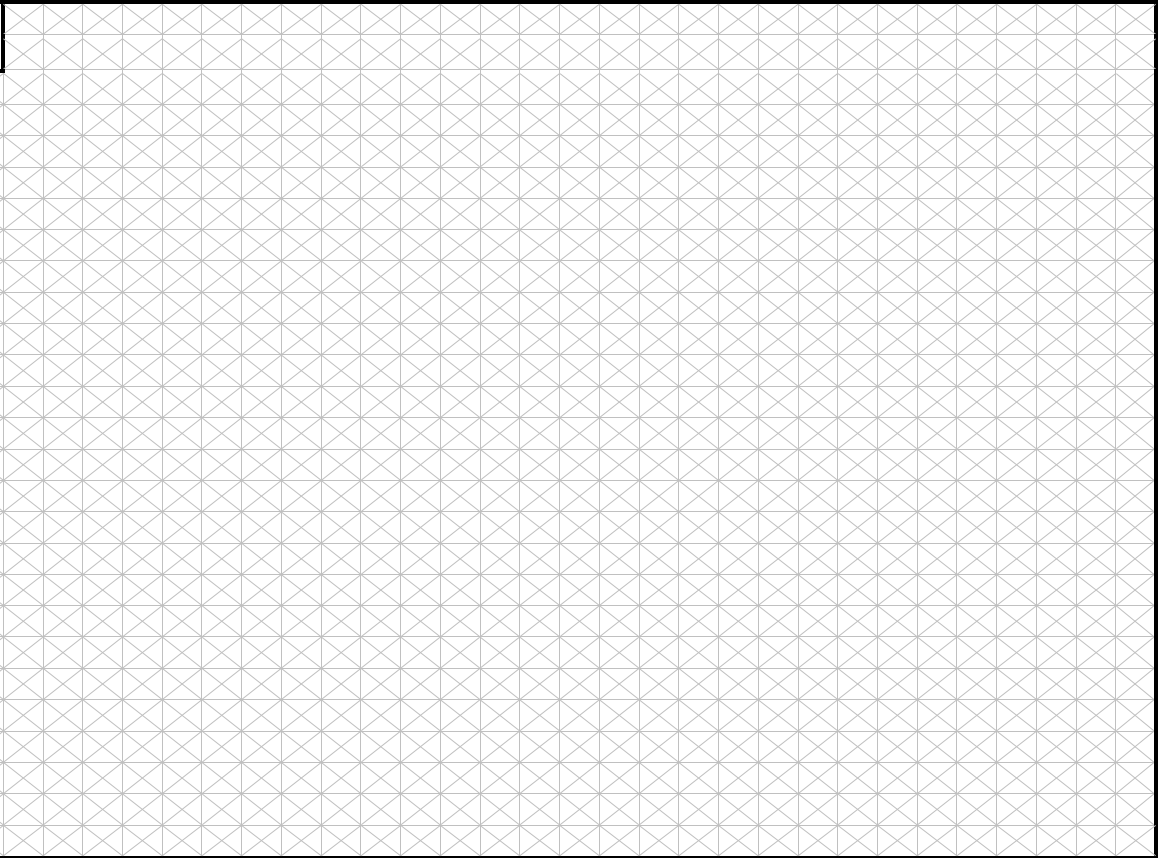
TOTAL FEES PAID ----- \$ _____

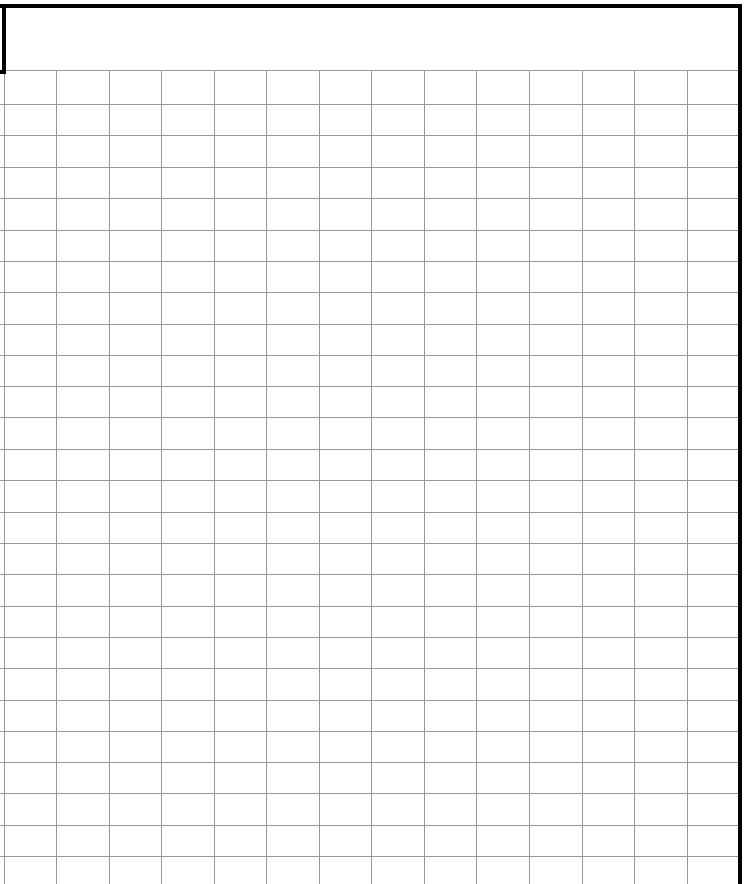
PLANS APPROVED / PERMIT ISSUED		DPS&S		DATE	
ENG.	DATE				
INSPECTIONS:					
		INT	DATE	INT	DATE
WATER	Line			Mtr	
PLUMBING	In-Wall			Slab	
"	Under Floor			Air-Slab	
SANITARY SEWER	Tap			Lateral	
"	Repair				
STORM SEWER	Tap			Lateral	
FOUNDATION	Footer Tile			COATG.	
				Remote	
				Final	
				C/O	
				Repair	
				Gravel	

USE THIS SIDE FOR ISOMETRIC AND FOUNDATION DRAWING OR ATTACH ADDITIONAL SHEET.

ISOMETRIC - SHOW THE LOCATION AND THE SIZES OF ALL WASTE AND VENT LINES, AND THE LOCATION OF ALL TRAPS AND FIXTURES. USE A SOLID LINE (_____) FOR THE WASTE LINE AND A DASHED LINE (-----) FOR THE VENT LINES.

PLAN DRAWING - SHOW THE ENTRANCE LOCATION OF THE BUILDING SEWER, STORM SEWER AND WATER LINE. ALSO SHOW THE DIRECTION AND DISTANCE FROM THE FOUNDATION TO THE MAINS. FOR ALL SANITARY AND/OR STORM SEWERS, SHOW THE DISTANCE FROM THE CONNECTION OR TAP TO THE NEAREST MANHOLE. ALSO SHOW THE LOCATION OF THE WATER METER AND REMOTE REGISTER.

ISOMETRIC:	
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PLAN DRAWING: (INDICATE NORTH)	
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