Plumbing Permit Application

Updated **SEPT 2026**

OFFICE USE ONLY

Permit Number: _____ Total Fees: _____

Approved by: _____ Date Approved:_____

Contractor Information

Contracting Company | Contractor Name

Contractor Address

Contractor Email | Contractor Phone

Local Business License Number | State License Number

Job Address | Owner Name

Owner Address

Owner Email | Owner Phone

Description of Work | Cost of Work

Affidavit

By signing below, I acknowledge that I am the owner/property manager and accept all responsibility pertaining to this request:

Applicant Name | Applicant Signature | Date