



## TOWN OF CAPE CHARLES APPLICATION FOR PLUMBING PERMIT

Date \_\_\_\_\_

Building Permit Number: \_\_\_\_\_  
(IF APPLICABLE)

**Is there a current Sewer/Water Account open at this address?** \_\_\_\_ Yes \_\_\_\_ No

A permit is hereby requested to install the following plumbing work at:

Street address: \_\_\_\_\_ Lot #/Suite #: \_\_\_\_\_

Owner/Occupant Name: \_\_\_\_\_

Owner Phone #: \_\_\_\_\_ Builder: \_\_\_\_\_

Building: \_\_\_\_ New \_\_\_\_ Existing \_\_\_\_ Addition \_\_\_\_ Moved

Building Type: \_\_\_\_ Residential \_\_\_\_ Commercial

Equipment Installed: \_\_\_\_ New \_\_\_\_ Replacement \_\_\_\_ Relocation

**PLEASE INDICATE THE NUMBER AND TYPE OF FIXTURES TO BE INSTALLED:**

Number of Full Baths: \_\_\_\_\_ Number of Half Bath: \_\_\_\_\_

Kitchen Sink		Kitchen Sink/Dshwshr		Bar Sink	
Mop Sink 2" Trap		Mop Sink 3" Trap		Laundry Tub	
Slop Sink 2" Trap		Slop Sink 3" Trap		2 Comp Sink	
3 Comp 1 1/2" Trap		3 Comp 2" Trap		Shampoo Sink	
Hand Sink		Lavatory		Eyewash	
Cuspidor		Vegetable Sink		Dipper Well	
Bidet		Bidet/Bathroom Grp		Urinal	
Pub Water Closet		Private Water Closet		Gas Water Heater	
Bathtub		Jacuzzi Tub		Shower	
Outside Shower		Footwash		Hose Bibb	
Dishwasher		Res Washing Mach		Water Pump	
Drinking Fountain		Ice Machine		Ice Cream Mach	
Electric Water Heater		Com Washing Mach		Grease Trap	
Drinking Fountain 2" Tap		Footwash 4" Trap		Baptismal	
Sump Pump		Force Main		Grinder Pump	
Oil/Water Heater		Sub Meter		Water Line	

Rough In Under Shell \_\_\_\_ Backflow Prev: RP \_\_\_\_ DC \_\_\_\_ PVB \_\_\_\_

Floor Drain/Floor Sink: 1 1/2 \_\_\_\_ 2" \_\_\_\_ 3" \_\_\_\_ 4" \_\_\_\_ 2" w/3" line \_\_\_\_

Floor Open Site Drain/Hub Drain: 1 1/2 \_\_\_\_ 2" \_\_\_\_ 3" \_\_\_\_ 4" \_\_\_\_ 6" \_\_\_\_

Water Line Replace Int \_\_\_\_ Ext \_\_\_\_ Sewer Line Replace \_\_\_\_ Clean Out \_\_\_\_

Water Conversion \_\_\_\_ Sewer Conversion \_\_\_\_ Clean Out \_\_\_\_

On-site Water: 1 Building \_\_\_\_ 2 or More Buildings (indicate #) \_\_\_\_

On-site Sewer: 1 Building \_\_\_\_ 2 or More Buildings (indicate #) \_\_\_\_

Additional information: \_\_\_\_\_

Applicant's Company Name: \_\_\_\_\_

State Registration # (Class A, B, or C): \_\_\_\_\_

(Certified Master Tradesman) Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Contract Value: \$ \_\_\_\_\_ Fee: \$ \_\_\_\_\_

I understand this permit is granted only for the work shown and described in this application.  
Any falsification, misrepresentation or misleading information given VOIDS this permit.

