JENNINGS

CALL FOR INSPECTIONS 337-886-6069

RESIDENTIAL PLUMBING PERMIT APPLICATION

Owner: Perm		it # Date:		
Project Location:	505 50 511500s		B	
Mailing Address:		8)		
City:	State: Zip:	Phone	#:	
Building Permit #				
Plumbing Contractor: _	ractor:		Phone #:	
RESIDENTIAL	ı			
(This column per item)		General		
Water closets	\$5.00	Water Service		\$50.00
Tubs	\$5.00	Sewer Service		\$50.00
Lavatories	\$5.00	Gas Service		\$50.00
Sinks	\$5.00	Rough –In		\$50.00
Clothes Washer	\$5.00	Water Heater Replacement		\$50.00
Dish Washer	\$5.00	Smoke Test		\$50.00
Showers	\$5.00	Smoke Test Repair		\$50.00
Floor Drains	\$5.00	Storm Drain per Rough-In		\$50.00
Water Heater	\$5.00	Storm Drain		\$50.00
Electric Water Cool	er \$5.00	Backflo	w Preventer	\$50.00
Urinals	\$5.00	31		
Misc. Fixtures	\$5.00			
Storm/Roof Drain	\$5.00			
	Re-inspection	\$50.00 Paid directly to BCIS		3
	Extra/Partial Inspection	\$50.00 Paid directly to BCIS		
	Over time inspection	\$50.00 Paid directly to BCIS		
	General inspections	\$50.00 Paid directly to BCIS		
	"No Permit" Fee	Double Fee		
Total Permit	Fee \$			
Paid by Cas	sh or Check #	Visa	Mastercard	
Applicant Signature:		Date:		
City Official:		Date:		

Note Permit will expire 180 days after issue date.