

# Plumbing Permit Application

P&D Time Stamp Below



CITY OF KETTERING

Planning and Development Department  
3600 Shroyer Road • Kettering, Ohio 45429  
937-296-2441 • fax 937-296-3240

For Office Use Only

Permit Number: \_\_\_\_\_

Related permit or project \_\_\_\_\_

Revised October 2007

- Residential  
  Commercial  
  Multifamily  
  Condo  
  Double  
  Kettering  
  Oakwood

Project Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

City, State and Zip Code: \_\_\_\_\_ Fax: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

### Plumbing Permit (water)

- New**       **Replacement**
- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Water Heater         | <input type="checkbox"/> Water Softener       | <input type="checkbox"/> Sump Pump               |
| <input type="checkbox"/> Irrigation           | <input type="checkbox"/> Internal Water Lines | <input type="checkbox"/> Sewer Repair            |
| <input type="checkbox"/> Move/Replace Meter   | <input type="checkbox"/> Storm Drain          | <input type="checkbox"/> Roof Drains             |
| <input type="checkbox"/> *Commercial Backflow | <input type="checkbox"/> *External Water      | <input type="checkbox"/> *External Sewer Lateral |

\*Submit a copy of county permit with this application for the three items listed above.

#### Select fixture and enter quantity to be installed:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Sink _____                 | <input type="checkbox"/> Tub _____          | <input type="checkbox"/> Toilet _____     |
| <input type="checkbox"/> Shower _____               | <input type="checkbox"/> Auto. Washer _____ | <input type="checkbox"/> Dishwasher _____ |
| <input type="checkbox"/> Disposal _____             | <input type="checkbox"/> Urinal _____       | <input type="checkbox"/> Lavatory _____   |
| <input type="checkbox"/> Floor Drain _____          | <input type="checkbox"/> AAV _____          |   |
| <input type="checkbox"/> Other _____ Describe _____ |   |   |
| <input type="checkbox"/> Other _____ Describe _____ |   |   |
| <input type="checkbox"/> Other _____ Describe _____ |   |   |

**Total Number of Openings** \_\_\_\_\_

- Annual Permit  
  Reinspection for Permit# **P** \_\_\_\_\_

### Plumbing Permit (gas)

Isometric drawings required for all gas work

- New Install**     **Replacement**
- Gas Openings: how many? \_\_\_\_\_ drawings are required
- Move/Replace Meter
- Test Gas House Line
- Fireplace
- Furnace
- Stove
- Other (Qty \_\_\_\_\_)
- Describe \_\_\_\_\_
- \_\_\_\_\_
- Reinspection for Permit# **P** \_\_\_\_\_

### Additional Description for this Improvement

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### Payment Method and Information

- Cash  
  Check  
  VISA  
  Mastercard

Check or Card Number \_\_\_\_\_

Card Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Rec'd by \_\_\_\_\_

### Applicant Agreement and Signature

I hereby certify that I am the owner of the subject property, or that upon full knowledge of the owner the proposed work is authorized and the owner has authorized me to act as the owner's agent with power and authority to make this application on behalf of the owner; and further that the owner and, if applicable, the owner's agent agree to conform to all applicable laws of the City of Kettering and State of Ohio; and that all information on this application is true and correct to the best of my knowledge.

Applicant Signature \_\_\_\_\_ Title or Company \_\_\_\_\_

Print Applicant Name \_\_\_\_\_ Date \_\_\_\_\_