

PLUMBING PERMIT APPLICATION

TOWN OF SOMERS
BUILDING DEPARTMENT
600 MAIN STREET
SOMERS, CT 06071
860-763-8220

PERMIT #

P

LOCATION OF WORK _____

APPLICANT _____		
STREET-MAILING ADDRESS _____		
TOWN _____	STATE _____	ZIP _____
PHONE NUMBER _____		

	COST	FEE
ESTIMATED	_____	_____
PAID	_____	_____
	CHECK NO.	DATE

OWNER _____		
OWNER'S ADDRESS _____		
PHONE NUMBER _____		

FEE SCHEDULE: \$12.00 per \$1000.00 (or any part thereof) \$.26 per \$1000 State Fee Included
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TYPE OF WORK:

- RESIDENTIAL COMMERCIAL NEW ADDITION/ALTERATION REPAIR

PURPOSE OF PERMIT _____

NUMBER OF FIXTURES:

SIZE AND TYPE OF PIPING

TOILETS _____
SHOWERS _____
BATHTUBS _____
SINKS _____
LAVATORIES _____

BUILDING DRAIN _____
WASTE _____
MAIN VENT _____
WATER _____
GAS _____

THE UNDERSIGNED HEREBY APPLIES FOR A PERMIT TO PERFORM THE WORK DESCRIBED AND AGREES TO COMPLY WITH ALL LOCAL ORDINANCES AND CONNECTICUT BUILDING CODES IN THE PERFORMANCED OF SUCH WORK

SIGNATURE OF APPLICANT _____

APPROVED _____

DATE _____ LICENSE # _____

BUILDING OFFICIAL _____

FIRE MARSHAL _____
(sprinkler/suppression permits only)