CITY OF WEST LIBERTY

409 N. Calhoun Street – West Liberty, IA 52776 Phone: (319) 627-2418 Fax: (319) 627-4847

PLUMBING APPLICATION AND PERMIT

Building Address			
Owner		Phone:	
Plumbing Contractor			
Contractor Address		Phone:	_
Date	Lic#	_ IA Contractor Reg. #	
QuantitySinksLavatoriesTubs/ShowersWater ClosetsDish WashersClothes Washers	Quantity Floor Sinks Water Heaters Water Softeners Laundry Tubs Urinals Backflow Preventors Type	Quantity Grease Traps Interceptors Other Fixtures Building Sewer Gas Pipe Outlet Floor Drains	s
	Permit Fees		
	ry additional \$25,000 in value only – commercial to be 1.5 times thes tanks shall be separate - \$100 base plu	s time and fringes+	
Value of Plumbing Work	:\$	Permit Fee: \$ + Inspection Fee:	\$ 30.00
NOTICE: Separate permits are reconstruction authorized is not comm of 180 days at any time after work contractors performing work in the C	enced within 180 days, or if construis commenced. A License and Pe	uction or work is suspended or	abandoned for a period
I agree to perform the work desc with all provisions of the Plumbin		rty	
		Permit No -	·
Signature of Applicant	Date	Date	
		Approved:	