

**EAST COVENTRY TOWNSHIP**  
**Application for Plumbing Permit**

**(3 Copies of Application are Required with Original Signatures)**

|                        |  |
|------------------------|--|
| <b>Job Location:</b>   | Address: _____<br>City State Zip: _____                                |
| <b>Property Owner:</b> | Name: _____<br>Address: _____<br>Phone: _____ Cell: _____ Email: _____ |
| <b>Contractor:</b>     | Name: _____<br>Address: _____<br>Phone: _____ Cell: _____ Email: _____ |

**TECHNICAL SITE DATA:**

**Type of Work (List all Fixtures):**

No. Fixtures

- |  |   |
|--|---|
| <input type="checkbox"/> Water Closet/Bidet/Urinal<br><input type="checkbox"/> Bathtub<br><input type="checkbox"/> Lavatory/Sink<br><input type="checkbox"/> Shower/Floor Drain<br><input type="checkbox"/> Washing Machine<br><input type="checkbox"/> Dishwasher<br><input type="checkbox"/> Commercial Dishwasher<br><input type="checkbox"/> Water Heater<br><input type="checkbox"/> Domestic Boiler<br><input type="checkbox"/> Furnace<br><input type="checkbox"/> Steam Boiler<br><input type="checkbox"/> Water Util. Connection<br><input type="checkbox"/> Sewer Util. Connection<br><input type="checkbox"/> Hose Bib<br><input type="checkbox"/> Water Cooler | <input type="checkbox"/> Garbage Disposal<br><input type="checkbox"/> Air Conditioner Unit<br><input type="checkbox"/> Indirect Connection<br><input type="checkbox"/> Sewer Ejector<br><input type="checkbox"/> Grease Trap<br><input type="checkbox"/> Interceptor<br><input type="checkbox"/> Backflow Device<br><input type="checkbox"/> Reduced Pressure<br><input type="checkbox"/> Vent Stack<br><input type="checkbox"/> Solar System<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Other _____ |
|--|---|

| <b>PLUMBING CHARACTERISTICS</b>   | <b>DESCRIPTION OF WORK</b> |
|---|----------------------------|
| USE GROUP: _____ Current _____ Proposed _____<br>Drainage      Material _____ Size _____<br>Building Sewer Material _____ Size _____<br>Water Service Material _____ Size _____<br>Venting        Material _____ Size _____ |                            |
| Estimated Cost of Plumbing Work: \$ _____   |                            |

Authorization to Access Property

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent. I hereby attest to the information on this application to be accurate and true to the best of my ability. I agree to conform to all applicable laws of East Coventry Township and certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable of such permit.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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