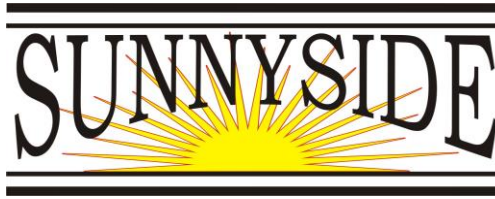


City of Sunnyside
 (509) 837-4229 Office
 (509) 836-6383 Fax



Building Division
 818 E. Edison Avenue
 Sunnyside, WA 98944

Permit # _____

Plumbing Permit Application

Residential Commercial

SITE ADDRESS: _____ ASSESSOR'S PARCEL NO: _____

Building Owner			
Name:	Phone:	Fax:	
Address:	City:	State:	Zip:
Contractor			
Name:	Phone:	Fax:	
Address:	City:	State:	Zip:
License No:	City Business Lic:		
Applicant			
Name:	Phone:		

	DESCRIPTION OF WORK		# OF UNITS	X	COST	=	TOTAL AMOUNT
1	TUBS/SHOWERS (PER TRAP)	BATH, STALL ON-SITE BUILT		X	\$7.00	=	
2	TOILETS/URINALS/BIDET	WATER CLOSET, BIDETS		X	\$7.00	=	
3	SINKS (Circle Type)	LAVS/BASINS, BAR, FLOOR, KITCHEN, LAUNDRY, UTILITY, JANITOR, PHOTO,		X	\$7.00	=	
4	DISHWASHER			X	\$7.00	=	
5	GARBAGE DISPOSAL			X	\$7.00	=	
6	CLOTHES WASHER			X	\$7.00	=	
7	WATER HEATER	NOTE: IF GAS, ADD GAS PIPING		X	\$7.00	=	
8	FLOOR DRAINS (Circle Type)	AREA, CASE, COIL, TRENCH, CONDENSATE		X	\$7.00	=	
9	ROOF DRAINS/OVERFLOW DRAINS	PER DRAIN / DOWNSPOUT		X	\$7.00	=	
10	HOSE BIB / WATER USING DEVICE (Circle Type)	ICE AND/OR COFFEE MAKER, STEAMER, CARBONATOR, SWAMP COOLER, PROOFER		X	\$7.00	=	
11	FOUNTAINS, DRINKING			X	\$7.00	=	
12	MISCELLANEOUS PLUMBING FIXTURE (LIST)	EXPANSION TANK / WATER SOFTENER		X	\$7.00	=	
13	BACKFLOW PREVENTER* (Circle Type)	VACUUM BREAKER, CHECK VALVE, AND R.P.B.P.D. FOR: VATS, TANKS, BOILERS		X	\$7.00 -2" \$15.00 +2"	=	
14	LAWN SPRINKLER			X	\$7.00	=	
15	WATER SERVICE			X	\$7.00	=	
16	BUILDING DRAIN			X	\$7.00	=	
17	BUILDING SEWER			X	\$15.00	=	
18	SEWAGE EJECTOR	GRINDER, SUMP PUMP		X	\$7.00	=	
19	INTERCEPTORS (Circle Type)	GREASE TRAP, SAND TRAP, CHEMICAL HOLDING TANK, INDUSTRIAL WASTE		X	\$7.00	=	
20	GAS PIPING 1-4 OUTLETS			X	5.50	=	
21	GAS PIPING 5 OR MORE - PER OUTLET			X	1.00	=	
22	MEDICAL GAS (PER OUTLET)	NITROUS, OXYGEN		X	\$7.00	=	
23	INSPECTION OUTSIDE NORMAL HOURS			X	\$47.00	=	
24	RE-INSPECTION FEE			X	\$47.00	=	
25	CHANGES, ADDITIONS, REVISIONS			X	\$47.00	=	
			SUBTOTAL				

*Approved residential backflow devices are Watts 007 and Wilkins 950 XLT only	BASE FEE	\$20.00
	TOTAL PERMIT FEE DUE:	

Signature _____ Date _____ Received by _____

I certify, by my signature, that the information submitted in this application packet is true and accurate. Determination of information to be in error could result in revocation of permit. Revised 8/7/2008