

City of Elkhart

Permit #: _____

209 S. Second St.
Elkhart, IN 46514

Accepted by: _____

Plumbing Permit Application

City of Elkhart Plumbing Inspector: Stephen Bray

(Please print or type)

Job Location _____

Present Use: Residential # of Units _____ Commercial _____

Proposed Use: Residential # of Units _____ Commercial _____

Owner's Name: _____ Phone (____) _____

Licensee: _____

Email Reports To: _____

Licensee's Company _____ Phone (____) _____

Description of work _____

Water Closet	Bidet	Bath Tub	Shower Stall	Hot Tub	Lavatory	Pool
Sink	Urinal	Laundry Tub	Dishwasher	Disposal	Water Heater	
Water Softener	Drinking Fountain	Open Site Drain	Floor Drain	Water Pump	Washing Machine	
Sewage Ejector	Sump Pump	Interceptor	Backflow Preventer	Any other break or connection into an existing house drain or building sewer		Fuel Gas Outlets

Each Plumbing Fixture or Waste Discharging Device:

First Fixture or One Single Fixture.....	\$40.00	\$ _____
Each Additional Fixture.....	X \$5.00 each	\$ _____
Public Swimming Pool.....	\$80.00 each	\$ _____
Private Swimming Pool	\$40.00 each	\$ _____
Water Softener Installation (in addition to other fixtures).....	\$15.00 each	\$ _____
Permit Re-instatement Fee.....	\$30.00 each	\$ _____
Private Sewer Fee.....	\$50.00 each	\$ _____
Each Additional Connection to a Private Sewer.....	X \$5.00 each	\$ _____
Late Permit Fee.....	\$200.00 or 2X	\$ _____
Fuel Gas Piping:	1 through 20 outlets: \$40.00	\$ _____
	21 through 100 outlets: \$65.00	\$ _____
	101 outlets and over: \$100.00	\$ _____
\$40.00 Minimum Fee		
	Total	\$ _____

I acknowledge that it is my responsibility as the holder of this permit to request all inspections, further I agree that all work, materials and construction shall be in accordance with all codes and ordinances adopted by the State of Indiana and the City of Elkhart. I hereby certify that all information that I have given herein is true and complete to the best of my knowledge and belief and that any false statement will be cause for voiding this application and permit.

Licensee Signature _____ Date _____

(Please sign your name)