

PLUMBING PERMIT APPLICATION

CITY OF WASHINGTON INSPECTION DEPT.

252-975-9334 252-975-9304 252-975-9352

Date _____

Permit No. _____

Job Address _____

Owner Name _____

Plumbing Contractor _____

Address _____ E-Mail _____

License Number _____ Phone Number _____ Contract Cost _____

DESCRIPTION OF WORK

New Construction () Square Footage _____

Renovation ()

Water/Sewer ()

Job Description _____

Signed _____