

# PLUMBING PERMIT APPLICATION

(NOTE: This is NOT a Plumbing Permit)

<b>APPLICANT</b>	Plumbers Name		Company Name	
	Address	City	Province	Postal Code
	Phone Number (incl. Area Code)	Fax Number (incl. Area Code)	Email Address (optional)	

<b>OWNER</b>	Contact Name		Company Name (if applicable)	
	Address	City	Province	Postal Code
	Phone Number (incl. Area Code)	Fax Number (incl. Area Code)	Email Address (optional)	

<b>PROJECT AND APPLICATION INFORMATION</b>	Building Address (including Unit No.)		Payment and Permit Information	
	Type of Project (please check applicable choice for this project)		Indicate preferred method of permit delivery (check below):	Indicate payment method for permit: (full payment must be included unless on account):
	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial		<input type="checkbox"/> Will Pick Up <input type="checkbox"/> Mail <input type="checkbox"/> Email <input type="checkbox"/> Fax	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Interac <input type="checkbox"/> Account (see below)
	Note: Residential projects include One and Two-Unit Dwellings. Commercial projects include all Multiple-Unit Dwellings.		Account No. (required if paid on account):	
	Type Of Construction	Fixture Details (please indicate numbers of fixtures below)		
	<input type="checkbox"/> New <input type="checkbox"/> Alteration/Addition <input type="checkbox"/> Inspection Only <input type="checkbox"/> Set Fixtures Only <input type="checkbox"/> RTM <input type="checkbox"/> Flood Protection Program	_____ Basins _____ Water Closets _____ Baths _____ Showers _____ Sinks _____ Automatic Washers _____ Floor Drains	_____ Urinals _____ Drinking Fountains _____ Mop Sinks _____ Grease Interceptors _____ Grit Interceptors _____ Roof Drains _____ Other (describe below):	
Additional Information (please provide below if required)				
Purpose Of Building (please check applicable boxes below)		OFFICE USE ONLY		
<input type="checkbox"/> One-Unit Dwelling <input type="checkbox"/> Warehouse/Manufacturing <input type="checkbox"/> Two-Unit Dwelling <input type="checkbox"/> Office <input type="checkbox"/> MUD - Town House Style <input type="checkbox"/> Strip Mall/Shopping Centre <input type="checkbox"/> MUD - Apartment Style <input type="checkbox"/> Restaurant <input type="checkbox"/> Laboratory/Research <input type="checkbox"/> Other ( _____ )		<b>PPA Number</b> _____ Method of Payment _____ Receipt Number _____ Applicant Cheque # _____ Amount Paid _____		

**PLEASE NOTE:**

- Plumbing Permit Applications must be APPROVED and permit issued before work commences.
- All work must conform to the Saskatchewan Plumbing and Drainage Regulations and any applicable City of Saskatoon Bylaws.
- All work must be left uncovered until inspected, and plumbers must notify the plumbing inspector when work is ready for inspection.
- Requests for inspections must be made at least 24 hours in advance, and confirmed on the morning of the scheduled inspection date.

**I certify that I have read and agree to abide by the conditions above, and that all information contained within this application is correct.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Application Received By

\_\_\_\_\_  
Date Received