 **RESIDENTIAL** **PLUMBING PERMIT**

290 E LINDEN AVE INSPECTION LINE: 208-417-7176

CHUBBUCK ID 83202 OFFICE LINE: 208-237-2430

E-MAIL: [permits@cityofchubbuck.us](mailto:permits@cityofchubbuck.us)

Plumbing Permit Number **CP22-**\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| PROJECT ADDRESS: | | |  | DESCRIPTION OF WORK | | |
| Application Date: |  | | |
| Project Name |  | | |
| Permit Type |  | | |
|  |  | | |
|  |  | | |  |  | |
|  |  | | | State Contractor # |  | |
| **OWNER** |  | | | **CONTRACTOR** Name: |  | |
| Name: |  | | | Business Name: |  | |
| Street Address: |  | | | Street Name: |  | |
| City, State Zip: |  | | | City, State Zip |  | |
| Phone Number: |  | | | Phone Number: |  | |
|  |  | | | Cell Phone : |  | |
|  |  | | | E-mail: |  | |
|  |  | | | Fax: |  | |
|  |  | | |  |  | |
|  |  | | |  |  | |
| **ISSUE FEES** | | **Quantity** | | **Unit price** | | **Total** |
| Base Fee | |  | | $30.00 | |  |
| Plumbing Fixtures Count | |  | | $6.00 | |  |
| Water Heater Replacement | |  | | $15.00 | |  |
| \*Lawn Sprinklers (Backflow Preventer Device) | |  | | $15.00 | |  |
| Water Line Separate | |  | | $25.00 | |  |
| Sewer Line Separate | |  | | $25.00 | |  |
| Water & Sewer Together | |  | | $40.00 | |  |
| **TOTAL** | |  | |  | |  |

\*Initial Here: After completion, I will submit the Backflow Test results from a Certified Tester, along with a description of the type and location of the device to the City of Chubbuck.

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