

**APPLICATION FOR PLUMBING PERMIT**  
**BUILDING DEPARTMENT – CITY OF SHELTON, CT**  
**PERMIT MUST BE OBTAINED BEFORE STARTING WORK**

Job Location \_\_\_\_\_ (Lot # \_\_\_\_\_) Date \_\_\_\_\_

Name of Owner \_\_\_\_\_ Address \_\_\_\_\_

Owner Phone # \_\_\_\_\_

Nature of Work: New \_\_\_\_\_ Repair \_\_\_\_\_ Alteration \_\_\_\_\_ Addition \_\_\_\_\_

Piping Material: Drain \_\_\_\_\_ Waste \_\_\_\_\_ Vent \_\_\_\_\_ Water \_\_\_\_\_

**Remarks:**

\_\_\_\_\_  
 \_\_\_\_\_

**FIXTURES Sewer Ejector**

Location	B	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	Location	B	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>
Water Closets					Washer				
Lavatories					Sinks				
Bath Tubs					Urinals				
Stall Showers					Whirlpool				

All work done shall comply with the requirements of the Connecticut State Building Code and Standards set forth therein. No work will commence until a permit has been issued.

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

Master Plumber (Print) \_\_\_\_\_ State License # \_\_\_\_\_

Firm Name or Trade Style \_\_\_\_\_ Telephone # \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_ ESTIMATED COST OF JOB \$ \_\_\_\_\_

<b>Fees:</b>		
Permit Fee \$ _____	◊Cash	Permit # _____
State Fee \$ _____	◊Check	Permit Date _____
Technology Fee \$ <u>5.00</u>		Receipt # _____