

Application for Plumbing Permit

The Corporation of the District of Saanich

Inspection Services Division, 770 Vernon Avenue, Victoria, B.C. V8X 2W7, (250) 475-5457, Fax 475-5418

NOTE: All data fields must be filled for the application to be processed. Please put N/A in any field that does not apply

LOT : _____ BLOCK : _____ PLAN : _____

ISD FILE : _____
ISD use only

SITE ADDRESS : _____

APP NO : _____
ISD use only

PROJECT DESCRIPTION : _____

RCPT NO : _____
ISD use only

DWELLING UNITS : _____ ROUGH IN ONLY : _____

OWNER:		PLUMBERS NAME: T.Q. No. (*Mandatory)	
ADDRESS:		SAANICH BUSINESS LICENSE: <input type="checkbox"/> YES <input type="checkbox"/> NO	
CITY: P.C.		LICENSE TYPE:	
DAY PHONE:	CELL PHONE:	NAME OF COMPANY:	
E-MAIL:		ADDRESS OF COMPANY:	
SIGNATURE:		CITY: P.C.	
		PHONE/CELL:	FAX:

FIXTURES	QTY	FIXTURES	QTY	FIXTURES	QTY
WATER CLOSETS		DRINKING FOUNTAINS		AUTOMATIC WASHER	
URINALS		JANITOR SINKS		OTHER - DISHWASHER	
BATHS		BAR SINKS		OTHER - H2O SUPPLIED FRIDGE	
SHOWERS		GREASE TRAP		OTHER - HOSE BIBS	
BASINS		FLOOR DRAINS		OTHER -	
SINKS		LAUNDRY TRAY		OTHER -	

SEWER/DRAIN/WATER	QTY	SEWER/DRAIN/WATER	QTY	SEWER/DRAIN/WATER	QTY
HOT WATER STORAGE TANK		STORM DRAIN PERMIT		GREASE INTERCEPTORS	
H/W TANK FLOOR DRAIN		WATER SERVICE PERMIT		PUMP STATIONS	
SEWER PERMIT		ROOF DRAINS		OTHER - DRAIN TILE	
SEWER PERMIT (NEW AREA)		INTERNAL ROOF LEADER		OTHER -	
SEPTIC TANK CONNECTION		MANHOLES (M.H.s)		OTHER -	

FIRE/IRRIGATION/OTHER	QTY	FIRE/IRRIGATION/OTHER	QTY	FIRE/IRRIGATION/OTHER	QTY
FIRE SPRINKLER HEADS (All)		B.F.P. FOR RESI. IRRIG. SYSTEM		OTHER-BACK FLOW PREVENTOR	
STANDPIPE HOSE OUTLETS		SWIM. POOL/DRAIN CONNECTIONS		OTHER -	
B.F.P. FOR COMM. IRRIG. SYSTEM		OTHER - FIRE WATER SERVICE		OTHER -	

The owner and contractor agrees to save harmless the Municipality and its employees from any claims, or action arising out of the installation of the plumbing system, development of the site, inspection of the building plans, site or building, including one based on negligence of the Municipality or its employees. I have read, understood and agreed to the above conditions.

Plumbers Signature _____

Print Name _____

Date _____

Personal Information Declaration: The information on this form is collected under the authority of the Municipal Act. The information provided will be used to apply for a permit to install plumbing. If you have any questions about the collection and use of this information, please contact the Municipal Clerk, 770 Vernon Avenue, Victoria, B.C. V8X 2W7, Telephone (250) 475-1775.

Building Permit No. _____ Received by: ISD Staff _____ Date _____