

ST. JOHN'S	PERS – Application for Plumbing Permit	Planning, Engineering & Regulatory Services
APPLICATION FOR PLUMBING PERMIT		

Internal Use Only	SECTION 1
-------------------	------------------

Application Number _____

Date Received _____ Parcel I.D. _____

Project Information	SECTION 2
---------------------	------------------

Civic Address _____

Subdivision Name _____ Lot # _____

Project Value Estimate (Materials & Labour) (\$) _____

Purpose of Application	SECTION 3
------------------------	------------------

Type of Building: Residential Commercial Industrial Institutional (Government)

Type of Work: New Construction Addition Alteration/Renovation Repair

Description of Proposed Work:

Work Type	Number	Cost (Office Use)
Water Closet		
Basin		
Bath		
Sink		
Urinal		
Shower		
Boiler		
Clothes Washer		
Laundry Tub		
Floor Drain		
Dish Washer		
Roof Drain		
Exterior Hose Bib		
Water Fee		
Misc.		
Total		

All work must be carried out in accordance with the City of St. John's Act and applicable by-laws and regulations

PERS – Application for Plumbing Permit

**Planning, Engineering
& Regulatory Services**

Applicant Contact Information

SECTION 4

Contractor Name _____ Trade Name _____
Address _____ Postal Code _____
Phone (Work) _____ (Cell) _____
Email Address _____

Owner Contact Information

SECTION 5

Name _____
Address _____ Postal Code _____
Phone (Home) _____ (Work) _____ (Cell) _____
Email Address _____

Note: Name of property owner must match that listed on the City of St. John's Assessment Roll

Applicant Signature of Agreement

SECTION 6

I hereby submit this application and confirm that the information supplied is, to the best of my knowledge, correct. I agree to comply with all City Regulations & By-Laws, agree to develop in accordance with the plans approved by the City of St. John's and not to commence development without applicable written approval and permits from the City of St. John's. In addition, I acknowledge that I have reviewed this application and agree to provide any additional information requested and to pay all applicable fees as noted on the City's fee schedule (www.stjohns.ca). To view these fees, please click on the link below that pertains to your application:

[Inspection Services Fees and Rates](#)

Note: Where the applicant and property owner are not the same, the signature of the property owner is required before the application can be accepted for processing.

Applicant Signature _____ Date (yyyy-mm-dd) _____
Property Owner Signature _____ Date (yyyy-mm-dd) _____
Staff Signature _____ Date (yyyy-mm-dd) _____

Collection of Personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process your Plumbing Permit Application. Questions about the collection and use of the information may be directed to the Manager of the Regulatory Services Division, by email: building@stjohns.ca or by phone 709-576-8565.

Please submit completed form to:

Inspection Services
3rd Floor - Annex
10 New Gower Street
P.O. Box 908
St. John's NL A1C 5M2

Email: permits@stjohns.ca
Fax: 709-576-8160
Call: 709-576-8565