



PLEASE PRINT

PER - 3211

Department of Planning, Engineering and Regulatory Services

PLUMBING PERMIT APPLICATION

Property Location

SECTION 1

Civic Address _____

Subdivision Name _____ Lot # _____

Roll # _____ File # _____ Date (yyyy-mm-dd) _____

Contact Information (to be completed by the applicant)

SECTION 2

Contractor Name _____ Signature _____

Company Name _____

Mailing Address _____ Postal Code _____

Telephone (Daytime) _____ (Fax) _____

Trade Name _____ Email _____

Owner Name _____

Mailing Address _____ Postal Code _____

Telephone (Daytime) _____ (Fax) _____

Email _____

Application Information

SECTION 3

Type of work: New Alteration Repair Addition

Type of building: Residential Commercial Industrial Institutional/Government

Estimated cost of all plumbing work (materials & labour): \$ _____

Is there any other work associated with this job besides plumbing? Yes No

Description of Work	SECTION 4
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Work Type	Number	Cost
Water Closet		
Basin		
Work Type	Number	Cost
Bath		
Sink		
Urinal		
Shower		
Boiler		
Clothes Washer		
Laundry Tub		
Floor Drain		
Dish Washer		
Roof Drain		
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.

Privacy Notice	SECTION 5
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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 application. Questions about the collection and use of the information may be directed to Randy Carew, Manager, Regulatory Services Division, by email: building@stjohns.ca or by phone 709-576-8565.

Please mail completed form to:	Access St. John's 10 New Gower Street P.O. Box 908 St. John's NL A1C 5M2	Email: service@stjohns.ca Fax: 709-576-7688 Call: 311 or 709-754-2489
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