

YEADON BOROUGH



APPLICATION FOR
PLUMBING PERMIT

Yeadon Office
Church Lane & Baily Road
P.O. Box 5187, Yeadon, PA 19050
610-284-3110 • Fax 610-284-2138

IMPORTANT – Applicant to complete all items in sections: I, II, III, and IV.

I. LOCATION OF BUILDING

AT (LOCATION) _____ ZONING DISTRICT _____
(NO.) (STREET)

BETWEEN _____ AND _____
(CROSS STREET) (CROSS STREET)

SUBDIVISION _____ LOT _____ BLOCK _____
LOT SIZE

II. TYPE AND COST OF BUILDING – All applicants complete Parts A - D

A. TYPE OF IMPROVEMENT

- 1 New building
- 2 Addition (If residential, enter number of new housing units added, if any, in Part D, 13)
- 3 Alteration (See 2 above)
- 4 Repair, replacement
- 5 Fence
- 6 Decks
- 7 Porch

B. OWNERSHIP

- 8 Private (Individual, corporation, non-profit institution, etc.)
- 9 Public (Federal, State, or local government)

C. COST

(Omit cents)

10. Other TOTAL COST OF IMPROVEMENT \$ _____

\$ _____

\$ _____

\$ _____

D. PROPOSED USE – For "Wrecking" most recent use

Residential

- 12 One or two family
- 13 Two or more family – Enter number of units _____
- 14 Garage
- 15 Day Care
- 16 Other – Specify _____

Non-residential

- 17 Amusement, recreational
- 18 Church, other religious
- 19 Industrial
- 20 Parking garage
- 21 Service station, repair garage
- 22 Hospital, institutional
- 23 Office, bank, professional

- 24 Public utility
- 25 School, library, other educational
- 26 Stores, mercantile
- 27 Tanks, towers
- 28 Other – Specify _____
- Existing Building

Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant.
 If use of existing building is being changed, enter proposed use.

III. SELECTED CHARACTERISTICS OF BUILDING

E. PRINCIPAL TYPE OF FRAME

- 29 Masonry (wall bearing)
- 30 Wood frame
- 31 Structural steel
- 32 Reinforced concrete
- 33 Other – Specify _____

F. DIMENSIONS

34 Number of stories _____

35 Total square feet of floor area, all floors, based on exterior dimensions _____

36 Total land area, sq. ft. _____

PERMIT NO. _____

(OVER)

Date _____

PLUMBING PERMIT APPLICATION									
Enter the number of Fixtures Being Installed, Replaced or Repaired									
	Tubs/showers		Laundry Tubs		Sump Pumps				
	Shower Stalls		Dishwashers		Grease Traps				
	Lavatories		Garbage Disposals		Back Flow Preventers				
	Toilets		Drinking Fountains		Water Pumps				
	Urinals		Floor Drains		Roof Openings				
	Bidets		Water Heaters		Parking Lot Drains				
	Sinks		Water Softeners		Inside Downspout				
	Sewer Line		Sewage Ejectors		Lawn Sprinklers				
	Water Line		Curb Trap						
WATER SERVICE SIZE _____ IN.			TOTAL NO. OF FIXTURES _____						
Install Lateral or drainage	MATERIAL TYPE	DIAMETER	LENGTH	NO. CLEANOUTS	Install Water service	MATERIAL TYPE	DIAMETER	LENGTH	

DESCRIPTION OF WORK

IV. IDENTIFICATION – To be completed by all applicants			
	Name	Mailing address - Number, Street, City, and State	Tel. No.
1. Owner or Lessee			
2. Contractor			Builder's License No.
3. Architect or Engineer			
I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.			
Signature of applicant		Address	Application date