EST. 1955
SPRING VALLEY
VILLAGE

Community Development
City of Spring Valley Village

BUILDING PERMIT APPLICATION (PLUMBING)

PROPERTY/OWNER INFORMATION	
Project Address:	Master Permit#:
Owner Name:	Phone#:
Owner Address:	

CONTRACTOR INFORMATION	
Contractor Name:	Phone#:
Contractor Address:	
Email:	License#:

PROJECT INFORMATION

Class of Work: ☐ New ☐ Addition ☐ Alteration ☐ Repair

Describe Work:

	Quantity		Quantity
☐ Bathtub	_____	☐ Lavatory (Wash Basin)	_____
☐ Dishwasher	_____	☐ Sewer	_____
☐ Drinking Fountain	_____	☐ Shower	_____
☐ Floor Sink or Drain	_____	☐ Toilet	_____
☐ Gas Systems (# Outlets)	_____	☐ Vacuum Breakers	_____
☐ Hose Bibs	_____	☐ Washing Machine	_____
☐ Kitchen Sink & Disposal	_____	☐ Water Heater	_____
☐ Laundry Tray	_____	☐ Water Interceptor	_____
☐ Other	_____	☐ Water Piping & Treatment Equip.	_____

PROPERTY OWNER/AGENT AUTHORIZATION

Property Owner Consent/Agent Authorization: By my signature, I hereby affirm that I am the property owner of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is complete and accurate, and it is understood that I agree to the application being requested for this property. Additionally, my signature below indicates my awareness of the fee required at the time of the application submittal and any additional fees as noted in the City's fee schedule. This fee is non-refundable even in the event of application withdrawal. I have the power to authorize and hereby grant permission for City of Spring Valley Village officials to enter the property on official business as part of the application process. Separate applications need to be made and permits required for driveway, electrical, ventilating or air conditioning work.

_____

Signature of Contractor/Authorized Agent | Printed Name | Application Date

FOR OFFICE USE ONLY

Building Permit Number: _____ Date Submitted: _____

Approved By: _____ Date Approved: _____