



**Borough of Somerset - Building Inspection Department**

PO Box 71, Somerset, PA 15501-0071  
Office: (814) 445-5595 Fax: (814) 445-3931

**PLUMBING PERMIT**

OFFICE USE ONLY	
DATE: _____	PERMIT FEE: _____
PERMIT NUMBER: _____	DATE PAID: _____
BLDG. PERMIT NO.: _____	CHECK NUMBER: _____
<b>NEW CONSTRUCTION</b> <input type="checkbox"/> Commercial \$75 <input type="checkbox"/> Residential \$50	<b>REPLACEMENT</b> <input type="checkbox"/> Commercial \$35 <input type="checkbox"/> Residential \$15

All information below is required.

Location: \_\_\_\_\_

Owner: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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Contractor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

City: \_\_\_\_\_ Fax: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

PA Registration No.: \_\_\_\_\_

ITEM	NUMBER INSTALLED
STACKS	
SINKS	
BATHS	
WATER CLOSET	
LAVATORY	
TANK AND HEATER	
LAUNDRY TRAY	
WATER DIST. SYSTEM	
FLOOR DRAINS	
SEWAGE EJECTOR	
FOUNTAIN (Drinking)	

ITEM	NUMBER INSTALLED
SUMP	
SHOWERS	
URINAL	
CATCH BASIN	
DISHWASHING MACHINE	
HUMIDIFIER	
GARBAGE GRINDER	
WASHING MACHINE	
SPECIAL WASTES	
RAINWATER LEADERS	
MISC. FIXTURES	

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Building Inspector

*Application certifies that all information given is correct and that all pertinent electrical ordinances will be complied with in performing the work for which this permit is issued.*

**For more information regarding building permits/zoning visit our website at [www.somersetborough.com](http://www.somersetborough.com)**