APPLICATION FOR MECHANICAL AND/OR PLUMBING PERMIT

			I BOWEDE VOI	Pa	nge 1 of	
Municipality	County	Tax Parce	el			
Construction Site Address			Date Received			
Permit Applicant:		Owner				
		Address			one#	
Telephone:		State	Zip	Pho	 one#	
Email:		Describe r	proposed work in	detail		
			nopos ca work in			
Signature Own	ner 🗆 Authourized Agent 🗆				<u> </u>	
Date:						
Applicant certifies that	t the information contained herein is tru d all other federal, state, and municipal	ue and correct and the	hat the applicant w	ill comply	with the PA Uniform	
	_					
State Classification	1: New Commercial Other Con	nmercial N	ew Residential	Othe	r Residential	
MECHANICAL I						
Contractor						
	(if owner, put same name above)	Contractor	(if owner, put	same name abo	ove)	
Address		A ddmooo				
City	State Zip	City		State	Zip	
	Cell	Phone		Cell		
Fed Employee No		Fed Employee	No			
(Certificate of Insurance for Workers Compensation needed or		(Certificate of Insurance for Workers Compensation needed or				
signed exemption form)		signed exemption form)				
Estimate of total costs for all work		Estimate of total costs for all work				
		Technical Site		Technical	Site	
	Finance /F - min - man		Items	Data No.	Items	
Quantity	Fixture/Equipment	Quantity	Water Closet		Interceptor/Separator	
<u> </u>	Water Heater		Urinal/Bidet		Backflow preventer	
	Fuel Oil Piping		Bath tub		Grease trap	
	Gas Piping Steam Boiler		Lavatory		Sewer Connection	
	Hot Water Boiler		Shower		Sewer Pump	
			Floor drain		Stacks	
·	Hot Air Furnace Oil Tank		Sink		Solar	
<u> </u>	LPG Tank		Dishwasher		50.4.	
			Drinking fountain			
	Fireplace		Washing Machine			
	Hydronic Piping		Hose Bibb			
	Appliances		Water Heater			
<u></u>	Solar		Fuel Oil Piping			
	Heat Pump		Gas Piping			
	Fire Dampers		Steam Boiler			
	Exhaust Hood Sys.		Hot Water Boiler			
	HVAC		Water Service Cor	nnection		
			_			
Permit Issued to:	PERMIT HOLDER	Darmit Issued t	•			
Data Issued:	PERMIT HOLDER	— Ferrint Issued t	o:	PERMIT HOLD	DER	
Date issued:		——— Date Issued:				
	20011			_		
BCO No			_	B	BCO No	
Building Code Official		Building Code O	fficial			
BUILDING CODE O	FFICIAL USE ONLY	BUILDING C	BUILDING CODE OFFICIAL USE ONLY			
Plans Approved	Plans Approved with Comments	Plans Approved	d Plans A _l	pproved with	h Comments	
UCC Mechanical Fee:		UCC Plumbing	Fee:			
Plan Review Fee:		Plan Review Fo	ee:			
Scan Fee:		Scan Fee:				
Admin. Fee:		Admin. Fee:				
State Fee:		State Fee:				
Total Cost		Total Cost			COPYRIGHTED	