## TOWN OF OCEAN CITY PLUMBING AND GAS FITTING PERMIT APPLICATION

Location ID Number:	BP/PP Number:								
Final Date:	Inspection Number:								
Work Order Number:									
Job Address:									
Subdivision/Condo:									
Master's Name: Company Name:									
Company Phone:		Company Fax:	: <u></u> _		Cell Phone:				
Company Address:									
Plumbing Fixtures:	Residential	Commercial	Insp. Count	Descript	ion of Work:				
Clothes Washer									
Dishwasher Carbaga Dispessal				Dlease read	carefully and sign below:				
Garbage Disposal					I certify that I am a properly registered and insured Master Plumber/ Master Gas				
Kitchen Sink				Fitter or pos	Fitter or possess a Maryland Propane Gas Fitter Certification, as required by the				
Laundry Tub					State of Maryland Board of Plumbing.  I shall furnish the required drawings and specifications for this project. /				
Bar Sink				- understand	understand that any changes to this project will require the revised drawings or				
Lavatory				<b>—</b>	specifications be provided to this department.  I realize it is my responsibility to immediately verify the existence of any sewer				
Tub			-	laterals ne	laterals necessary to complete the submitted project. If the sewer lateral is not				
Shower			-		located, I understand that there will be an additional charge for that installation, and it may take up to 6 weeks to complete.  I further understand that it is my responsibility to give the required advance notice to the Town of Ocean City Plumbing Inspection Section when plumbing work is ready for testing and inspection.  I acknowledge that the above information is correct and agree to comply with all Town of Ocean City and State of Maryland plumbing regulations and policies for obtaining plumbing/gas fitting permits.				
Urinal/Bidet				I further					
Toilet				to the Town					
Water Heater			-	I acknov					
Drinking Fountain	—			Town of O					
Hand Sink	—			- Ontailining b	ovanimg puribing gas mang pormas.				
Dipper Well					Signature of Master Plumber or Gas Fitter License/Certificate#				
Floor Drain w/water supply					-				
Steam Fixtures w/water					-				
Water-cooled Equipment				Comments	5:				
Pool									
Other	<del> </del>		<del>                                     </del>						
Fuel Gas Appliances	Residential	Commercial	Insp. Count		Plumbing or Fuel Gas Permit Fees			Γ	
Fire Place	_		-	Count			Permit Fee		
Furnace					Minimum Commercial Plumbing or Fuel Gas (\$90)				
Grill					Commercial Plumbing or Fuel Gasl @ \$30.00				
Range						Minimum Residential Plumbing or Fuel Gas (\$45)			
Water Heater					Ŭ .	Residential Plbg or Fuel Gas @\$15.00 per fix.			
Other					Flat Rate (Capoff, etc.) @ \$90				
Other			<u> </u>	Other:					
Total	<u> </u>						Total		
		0	ffice Us	e Only					
Plans rec'd by:	Reviewed by: Iss			Issued by:	ued by: Date:				
Parcel:	Lot: Blo			Block:	ock: Map/Map Page:				
Property Owner:									
Owner Address:									
Plumbing Inspection	Date	Date Inspector Gas F			ection	Date	Insp	ector	
Rough-In Ground Work			***************************************	Rough-In Building Drain					
Rough-In drain/vent/waterlines			Rough-In Inside				<u> </u>		
Final Inspection	Final In			nal Inspection					