

**PENNSBURY TOWNSHIP**

**702 Baltimore Pike, Chadds Ford, PA 19317**

**Phone: 610-388-7323 Fax: 610-388-6036**

**Email: khowley@pennsbury.pa.us**

Office Use Only	
Permit #:	_____
Building Permit #:	_____
Date Received:	_____
Fee:	_____ Paid: _____

**PLUMBING PERMIT APPLICATION**

**(Residential)**

**Property Owner:** \_\_\_\_\_

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

Phone/Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Property Address: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Tax Parcel or UPI #: \_\_\_\_\_ Zoning District: \_\_\_\_\_

**Contractor:** \_\_\_\_\_ PA License #: \_\_\_\_\_

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

Phone/Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Building Type:** \_\_\_\_\_ Used As: \_\_\_\_\_

Completion Date: \_\_\_\_\_ Estimated Cost: \_\_\_\_\_

Ready for Inspection on: \_\_\_\_\_ or Contact Township when ready for inspection

Type of Equipment:	Number	Fee*
Stacks		
Sinks		
Baths		
Water closet		
Lavatory		
Tank and Heater		
Laundry Tray		
Water Distribution Systems		
Floor Drains		
Sewage Ejector		
Fountain (Drinking)		

Sump		
Showers		
Urinal		
Catch Basin		
Dishwashing Machine		
Humidifier		
Garbage Grinder		
Washing Machine		
Special Wastes		
Rainwater Leaders		
Miscellaneous Fixtures		
	<b>TOTAL FEE</b>	

\*Township Completes Fee Column

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 the authorized agent and we agree to conform to all applicable ordinances of Pennsbury Township.

Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Russell Drumheller  
Code Enforcement Officer