

# CITY OF MOLINE PLUMBING PERMIT APPLICATION

The undersigned hereby makes an application for a permit to install the following described plumbing installation in the building:

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

Address of installation: \_\_\_\_\_

Owner: \_\_\_\_\_ Owner's Phone: \_\_\_\_\_

Use of building: \_\_\_\_\_ Cost of Installation: \_\_\_\_\_

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

OFFICE USE ONLY	
Permit No.	_____
Permit Fee	\$ _____
Investigation Fee	\$ _____

Type of Work:       Remodel                       New Structure       Residential                       Commercial

Water Closet	_____	Slop Sink	_____	Grease Trap	_____	Water Svc Repair/Repl	_____
Lavatory	_____	Sink	_____	Urinal	_____	Sewer Svc Repair/Repl	_____
Bathtub	_____	Dishwasher	_____	Water Main Tap	_____		
Shower Stall	_____	Disposal	_____	Sewer Main Tap	_____		
Laundry Tray	_____	Floor Drain	_____	RPZ	_____		
WM Trap	_____	Water Heater	_____	Street Cut	_____		
Water Cooler	_____	3-Well Sink	_____	Blvd Cut	_____		

I hereby certify to the correctness of the above and agree that the above work will be done in conformity with all the laws of the State of Illinois and the Plumbing Code of the City of Moline, IL.

Authorized Signature \_\_\_\_\_

IL Contractors  
Certification No. \_\_\_\_\_