

City of Webster

Building Department

Office Hours Mon.-Thur. 7:30am-5:30pm

FAX: (281) 316-4128

OFC: (281) 338-2925 FAX: (281) 316-4128

PLUMBING PERMIT APPLICATION

APPLICANT/CONTRACTOR INFORMATION							
Name of Applicant: (Print)			State License #:				
Cell or Pgr. #							
Contractor Company Name:				Phone #: ()			
Contractor's Address:				FAX #: ()			
City:		State:			Zip:		
PROJECT INFORMATION							
Project Name:			(If applicable) Master Building Permit #:				
Address:	lress:			Phone #: ()			
City:		State:	TX	_	Zip:		
Property Owner:					TELEPHONE #		
Address:							
City: State:					Zip:		
WORK TO BE PERFORMED							
AS REQUIRED BY THE STANDARD BUILDING CODE AND THE CITY OF WEBSTER, THE DRAWINGS (2 SETS) INCLUDES THE COMPLETE SCOPE OF MECHANICAL WORK TO BE INSTALLED OR MODIFIED AS LISTED BELOW:							
Description		# of l	Jnits		Rate	Total	
Processing Fee					\$ 20.00	\$ 20.00	
Fixtures, Domestic & Commercial					3.00		
Water Heater (New or Replacement)					25.00		
Swimming Pool					50.00		
Lawn Sprinkler System (Irrigation)					25.00		
Gas Test					25.00		
Grease Trap System					15.00		
Septic Tank System					12.00		
					TOTAL:	\$	
Valuation of work to be done: \$							
Brief Description of Work:							
I DO HEREBY DECLARE THAT ALL INFORMATION CONTAINED WITHIN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, AND WILL BE INSTALLED IN CONFORMANCE WITH EXISTING REGULATIONS AND ADOPTED BY THE CITY OF WEBSTER.							
Signature:				Date:			
Print Name							