

# Plumbing Permit Application

Abington Township, PA

1176 Old York Road, Abington PA 19001, Fax: 215-884-8271, Telephone: 267-536-1000



## Property Information/ Job Location

## Plumber Information

Property Owner	<input type="text"/>	Plumber Name	<input type="text"/>
Address	<input type="text"/>	Plumber Address	<input type="text"/>
City/Zip	<input type="text"/>	Plumber Lic. No.	<input type="text"/>
Phone	<input type="text"/>	Plumber Phone	<input type="text"/>
Email	<input type="text"/>	Permit Number	<input type="text"/>

By signing this application, the applicant certifies that all information on this application is correct and the work will be completed in accordance with the approved construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the Municipality.

Applicant Signature \_\_\_\_\_

### DESCRIPTION OF PLAN AND ABSTRACT OF SPECIFICATIONS

All work, materials and construction to be in accordance with the rules and regulations of the Township of Abington Department of Code Enforcement and Land Development, and to comply therewith in all particulars.

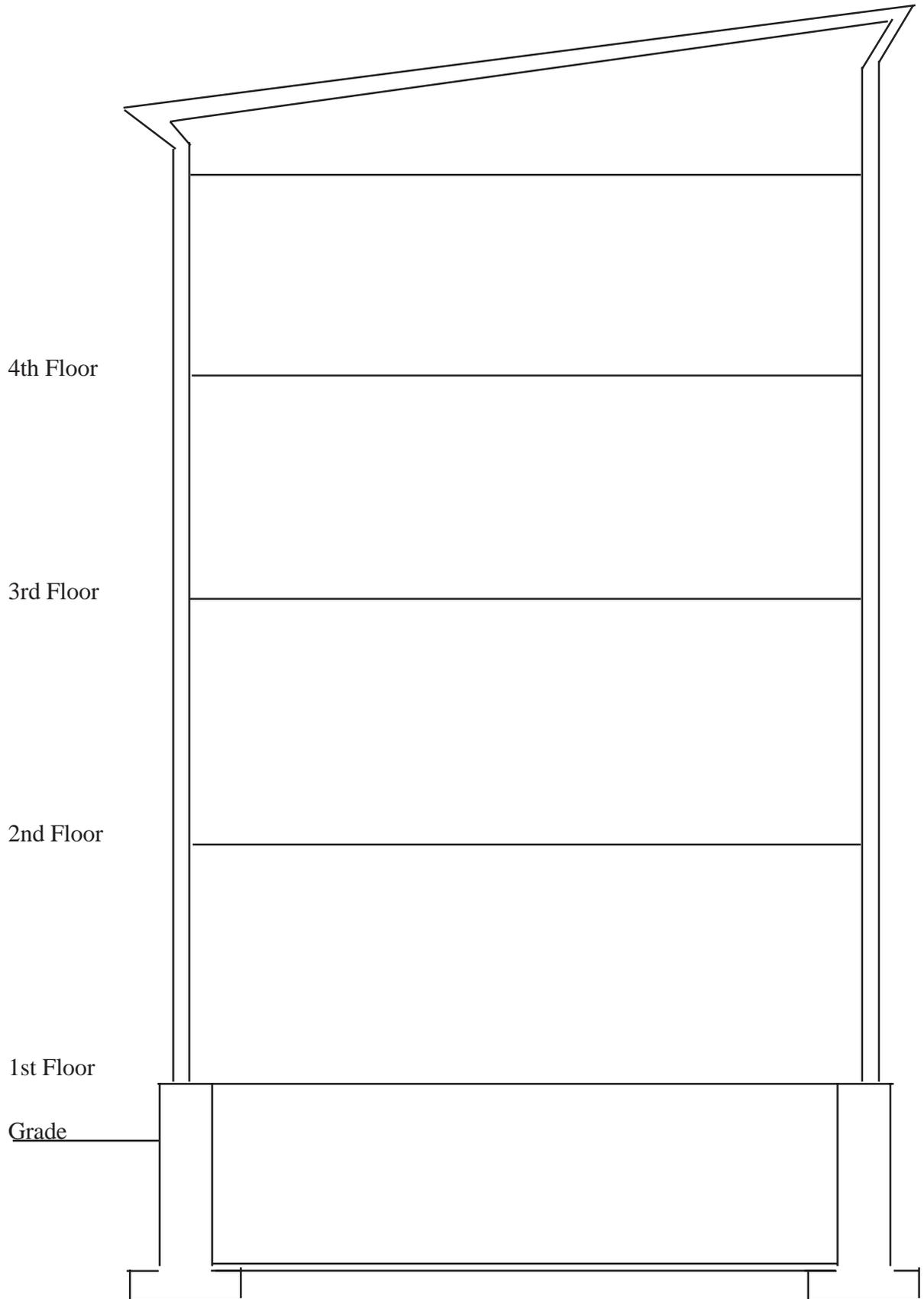
**Show on Back: Elevation showing pipe sizes in sketch.** List new fixtures in BLUE or BLACK ink, list old fixtures in RED ink.

	Basement	First	Second	Third	Fourth	Fifth	Total Fixtures	Type Fixtures	Fixture Units
Lavatories									
Water Closets									
Bath Tubs									
Shower Baths									
Bidet									
Urinals									
Sinks									
Service Sinks									
Special Sinks									
Combination Sink and Tray									
Laundry Tray									
Washing Machine									
Dish Washer									
Garbage Disposal									
Drinking Fountain									
Floor Drains									
Other									
Totals									

Fee \$ \_\_\_\_\_

Approved- Plumbing Inspector \_\_\_\_\_

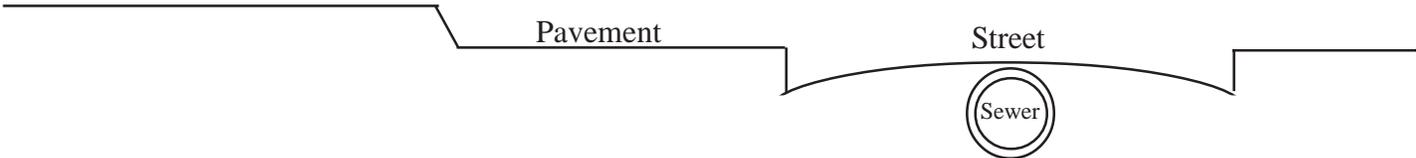
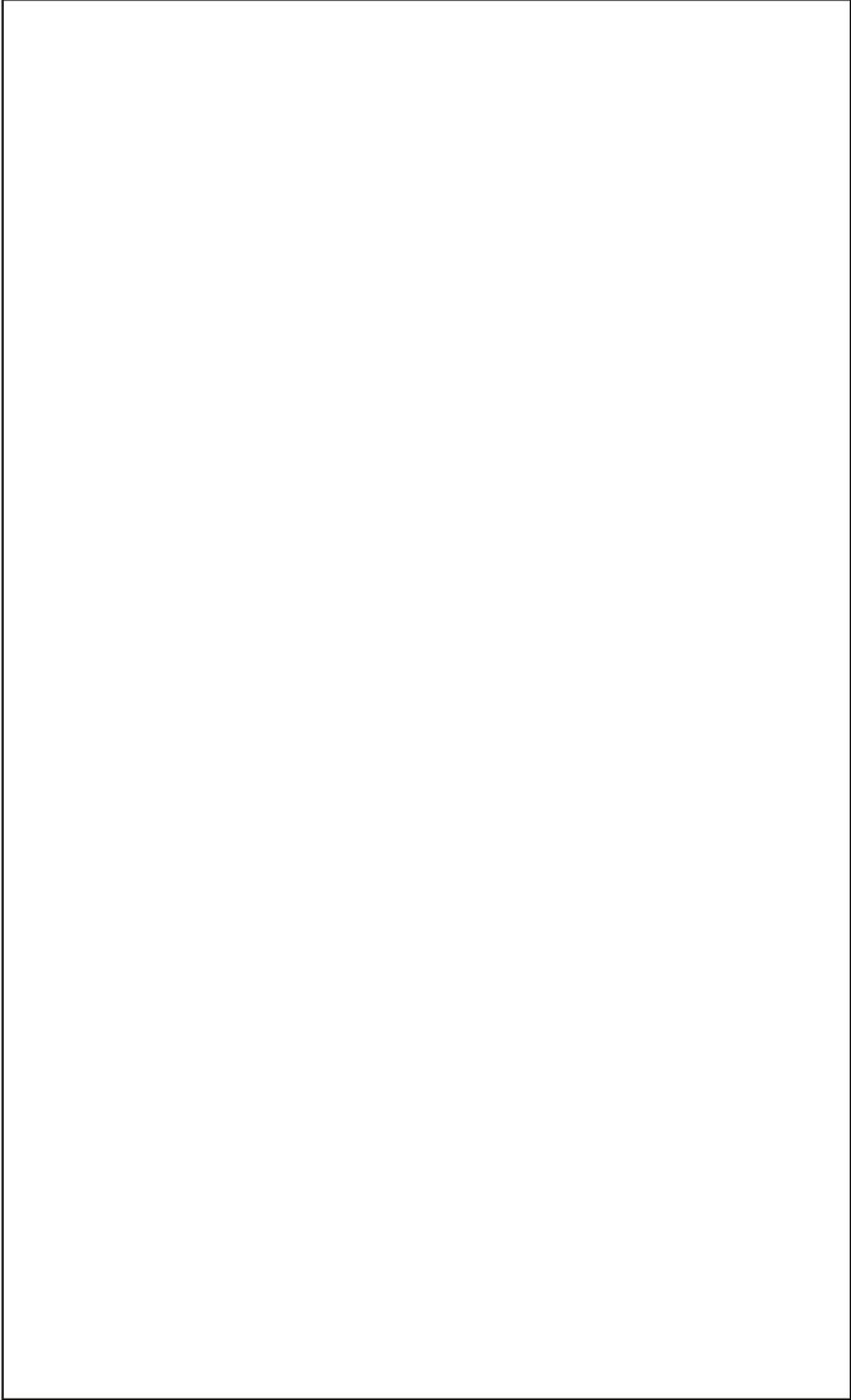
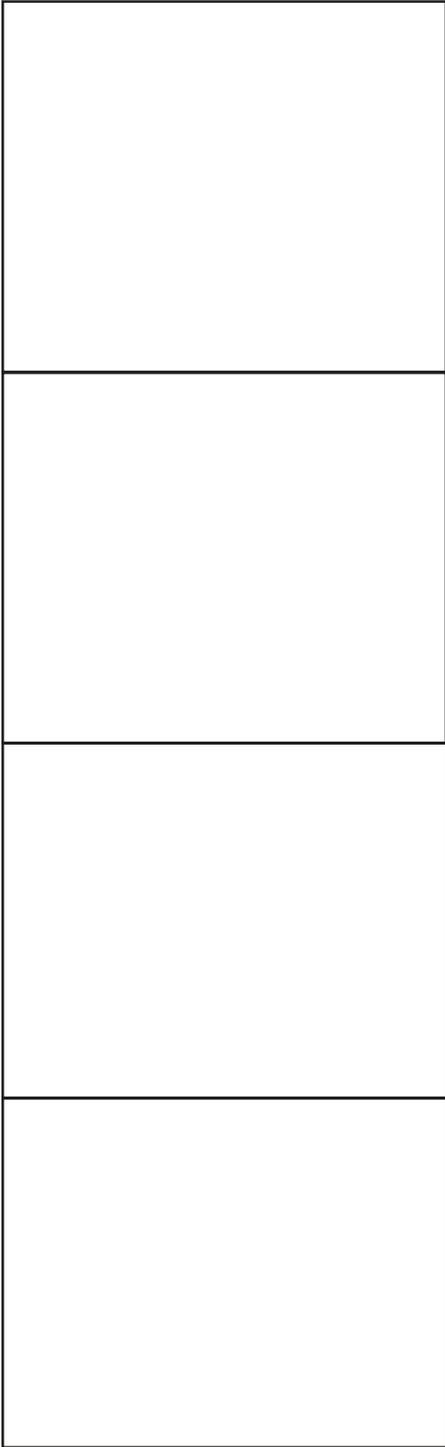
**ELEVATION SHOWING PIPE SIZES**



New work to be shown in **BLACK** ink.. Old work to be shown in **RED** ink.

**PLAN VIEW OF ENTIRE DRAINAGE SYSTEM DRAWN TO SCALE,  
SHOWING ALL WORK BELOW GROUND FLOOR LEVEL, AND  
SHOW PIPE SIZES.**

**FLOOR PLANS**



# REMARKS

## BUREAU OF HEALTH & SANITATION

## TOWNSHIP OF ABINGTON DEPARTMENT OF CODE ENFORCEMENT AND LAND DEVELOPMENT BUREAU OF HEALTH AND SANITATION

New Work \_\_\_\_\_

Date \_\_\_\_\_

Old Work \_\_\_\_\_

### TO THE DEPARTMENT OF CODE ENFORCEMENT & LAND DEVELOPMENT:

Plan & Permit No. \_\_\_\_\_

The following abstract of specifications of Plumbing and Drainage, with description and accompanying plan, are submitted for approval:

Premises of:

Owner \_\_\_\_\_

Plumber \_\_\_\_\_

Field \_\_\_\_\_ 20 \_\_\_\_\_

Address \_\_\_\_\_

### INSPECTOR'S REPORT

Registered Number \_\_\_\_\_

Inspected House Sewer \_\_\_\_\_

Owner \_\_\_\_\_

Inspected House Drain \_\_\_\_\_

Address \_\_\_\_\_

Inspected Vertical Soil Pipes \_\_\_\_\_

Tenant \_\_\_\_\_

Inspected Waste Pipes \_\_\_\_\_

Address \_\_\_\_\_

Inspected Test \_\_\_\_\_

Architect \_\_\_\_\_

Inspected Septic Tank \_\_\_\_\_

Address \_\_\_\_\_

Inspected Tile Field \_\_\_\_\_

Class of Building \_\_\_\_\_

Inspected Cesspool \_\_\_\_\_

Number of Stories \_\_\_\_\_

Location: Side of \_\_\_\_\_ Street

\_\_\_\_\_ Feet \_\_\_\_\_ of \_\_\_\_\_ Street

Town \_\_\_\_\_ Ward \_\_\_\_\_

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Size & Number of Soil Stacks \_\_\_\_\_

Size of House Drain \_\_\_\_\_

Size of House Sewer \_\_\_\_\_

Type of Sewage Disposal \_\_\_\_\_

If Cesspools, give dimensions and number \_\_\_\_\_

If Septic Tank, give type and capacity \_\_\_\_\_

Type of Final Disposal, Area, etc. \_\_\_\_\_

## Garbage Disposal

Make \_\_\_\_\_

Model \_\_\_\_\_

Serial # \_\_\_\_\_

### FINAL INSPECTION

Date \_\_\_\_\_

All work found in accordance with the plans, specifications and regulations.

Inspector \_\_\_\_\_