



Public Health
Prevent. Promote. Protect.

205 N. 7th Street, Zanesville, Ohio
(740) 454-9741 Fax (740) 455-6726

COMMERCIAL

Plumbing Permit

Permit # _____

Receipt # _____

Muskingum Coshocton

PLEASE PRINT

Job site located at: New Existing

Building Name _____

Street _____

City _____

Zip _____ Township _____

Plumber Contractor # _____

Contractor: _____

Street: _____

City/State/Zip: _____

Phone# _____

Property Owner information

Name: _____

Street: _____

City/State/Zip: _____

Phone# _____

Permits left dormant for more than one year are subject to review and revocation

***Penalty for installing plumbing prior to permit**

The undersigned hereby applies for a permit to do Plumbing conforming to and for the inspection thereof as provided in Sec.4101:3-1 thru 4101:3-13, Ohio Administrative Code and the Ohio Plumbing Code.

Plumbing permit applies to job location

	DESCRIPTION	# of Commercial Fixtures
01	Air Admittance Valve	
02	Backflow Devices	
03	Backwater Valve	
04	Building Sanitary Drain/Sewer	
05	Building Storm Drain	
06	Bidets	
07	Dental Cuspidors/Chair	
08	Drains, Floor/Hub/Trench	
09	Drains, Roof	
010	Emergency Shower/Eye Wash	
011	Expansion Tank	
012	Fountains, Drinking/Soda	
013	Garbage Disposal	
014	Hose Bibs/Outside Faucet	
015	Ice Makers	
016	Inside Water piping	
017	Interceptors/Grease Removal Device	
018	Lavatories/Hand	
019	Sewage/Ejectors/Sump Pump	
020	Shampoo Bowls	
021	Showers	
022	Sinks/Bar/Kitchen	
023	Sinks, Chemical/Clinical	
024	Sinks, Service	
025	Trap Primer	
026	Tubs, Bath	
027	Urinals	
028	Valves, Pressure Reducer	
029	Valves Tempering	
030	Washers, Clothes/Dish	
031	Washers, Bed Pan	
032	Water Closets	
033	Water Heaters	
034	Water Softener/RO	
035	Water Service	
037	Other	
TOTAL FIXTURES		x \$20.00 =
	Application Fee	+ \$200.00
	Commercial Plan Review	+ \$200.00
	Custom Built Shower ...\$ 50.00	
	*Penalty Fee\$150.00	
	Reinspection fee.....\$100.00	
	Grand Total	\$

Applicant's Signature _____

Date _____

PERMIT MUST BE POSTED ON SITE

Underground Inspection

Approved Reinspection Required Stop Work Approved with corrections

Rough-In Inspection

Approved Reinspection Required Stop Work Approved with corrections

Final Inspection

Approved Reinspection Required

Code #	Comments

Water Temps	Inspector_____	Witness_____
W.H.	_____	Water Pressure #_____
Lav	_____	
Sho	_____	
Bath Tub	_____	