



CITY OF DAUPHIN PLUMBING PERMIT APPLICATION

100 Main Street South, Dauphin MB R7N 1K3
 Phone: 204-622-3200 Fax: 204-622-3290

PERMIT # _____

FILE NUMBER: 12. _____

The undersigned hereby applies for a permit to build in accordance with this application, all the By-laws, Regulations and Policies applicable thereto.

The accuracy of the information which follow and the accompanying plans and specifications with the representations therein contained are the responsibility of the owners and are hereby made a part of this application.

LOCATION OF BUILDING _____

Legal Description:	Lot/Section	Block/Township	Plan/Range DLTO
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Building Permit # _____
 Zoning District _____
Flood Risk Area: Yes No

CLASS OF WORK

- New Repair Alteration Other: _____
 Addition Renovation

CONTACT INFORMATION

Plumbing Contractor _____ Phone # _____

Mailing Address _____

Building Contractor _____ Phone # _____

Mailing Address _____

Owner _____ Phone # _____

Mailing Address _____

Number and Location of Outlets and Fixtures (traps)

	Water closet	Bathtub	Basin	Kitchen sink	Laundry tub	Auto washer	Shower	Urinal	Floor drain	Roof terminal				FEES
Basement														
1 st floor														
2 nd floor														
3 rd floor														
													TOTAL FEES	

The permit is issued upon the conditions:

- a) that the construction shall be carried out in accordance with all provisions of the Manitoba Building Code and Manitoba Plumbing Code and all provisions as described on the building permit and plans submitted;
- b) that all municipal bylaws and provincial regulations be complied with and;
- c) that this department shall get copies of all changes ordered which may alter any condition or requirement of the Manitoba Building Code and/or Manitoba Plumbing Code, and a set of the revised plans showing these changes;
- d) where for any reason a permit is not obtained before the commencement of the work for which a permit is required, the permit is twice the amount prescribed.

SIGNATURE OF APPLICANT _____ DATE _____

Distributions _____ Receipt # _____

WHEN PROPERLY VALIDATED THIS IS YOUR PERMIT

SIGNATURE OF INSPECTOR _____ DATE _____