



COMMERCIAL APPLICATION FOR PLUMBING PERMIT

Clark County Combined Health District
 529 E. Home Road, Springfield, Ohio 45503
 Main: (937) 390-5600 Fax: (937) 390-5625
www.ccchd.com

Date: _____

PERMIT NO. C- _____

The undersigned hereby applies for a permit to do plumbing and for the inspection at the following location as provided in Chapter 3703 of the Ohio Revised Code and Chapter 4101:3-1 to 4101:3-13 of the Ohio Administrative Code.

An application for a permit to do plumbing must be submitted to this office before commencing any plumbing work. For commercial projects, 1 set of stamped isometric drawings, properly sized, must be submitted indicating the approximate manner in which drainage, waste and venting would be installed.

Exact Location (Address): _____

Owner's Name and Address: _____

Air Admittance Valve	Fountain-Garden	Sinks-Bar	Tub-Laundry
Aspirators	Fountain-Baptismal	Sinks-Chemical	Tub-Whirlpool
Auto Claves	Fountain-Drinking	Sinks-Clinical	Urinals
Autopsy Tables-Morgue	Fountain-Soda	Sinks-Domestic	Valves-Pressure Reducer
Backflow	Fountain-Wash	Sinks-Floor	Valves-Tempering
Backflow-Containment	Garbage Disposal	Sinks-Food Prep	Washers-Automatic
Backflow-Fire	Hot Water Dispensers	Sinks-Food Warmer Buffet	Washers-Bed Pan
Backflow-Isolation	Hydrotherapy Baths	Sinks-Instrument	Washers-dish
Backflow-Yard Sprinkler	Ice Makers	Sinks-Laboratory	Washers-Eye
Backwater Valve	Interceptors-Garage/Oil	Sinks-Lavatories	Water Closet
Bidets	Interceptors-Grease	Sinks-Mop	Water Heater
Booster Pump	Piping System-Chemical	Sinks-Pharmacy	Water Softners
Chemical Waste Neutral Tank	Piping System-Sanitary	Sinks-Plaster	Woks
Dental Cuspidors	Piping System-Storm	Sinks-Scullery	Yard Hydrants
Dental Lavatory-Chair	Piping System-Water	Sinks-Surgical	
Dilution Sumps	Reverse Osmosis	Sinks-X-Ray	
Drains-Floor	Sewage Ejectors	Steamers-Food	
Drains-Roof Storm	Shampoo Bowl	Sterilizers	
Drains-Trench	Shower-Emergency Drench	Sump Pumps	
Expansion Tank	Showers	Tub - Bath	

Total: _____ **Total:** _____ **Total:** _____ **Total:** _____

Application For Permit..... **\$50.00**
 Each Trap or Fixture Appliance, Device or Apparatus..... \$12.00 each..... \$
 Plan Approval Fee (See Chart Below)..... \$

New or Replacement Water/Sewer Lines:
 Water Line 1'-100' = \$50.00 + \$1.00 per lineal over 100' (cap at \$150.00) { _____ ft}..... \$
 Sewer Line 1'-100' = \$50.00 + \$1.00 per lineal over 100' (cap at \$150.00) { _____ ft}..... \$

Notice: All connection fees and/or assessments must be paid to the City of Springfield before connection to City Utilities will be permitted. Please contact the City of Springfield Engineering Department at (937) 324-7312 for information regarding these charges.

Penalty for Starting Work Without Permit = \$50.00 + 25% of Permit Fee \$
 Re-Inspection Fees for Code Violations or Contractor Unprepared are \$100 per re-inspection..... \$
 Inspections conducted outside normal working hours per hour portal to portal..... \$50.00 each..... \$

1 - 20	Fixtures =	\$40.00
21 - 40	Fixtures =	\$60.00
41 - 60	Fixtures =	\$80.00
60 - 100	Fixtures =	\$100.00
100 +	Fixtures =	\$150.00

Other..... \$
TOTAL FEES DUE..... \$

\$200	-	\$500	=	8
\$501	-	\$750	=	10
\$751	-	\$1,000	=	12
Multiples	of \$1000	10 per	\$1,000	

 Original Signature (Master Plumber/Owner Occupant)

 Printed Plumbing Company/Homeowner Name

 Registration/Phone #

Receipt #: _____