PERMIT #_____

CITY OF BINGEN
PO Box 607
Bingen, WA 98605
509-493-2122/Fax 509-493-1391

Plumbing Permit Application

Applicant: _____Phone #: ( ) _____

Mailing Address: _____City: _____ State: _____Zip Code: _____

Email: _____

Property Owner: _____ Phone #: ( ) _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Email: _____

Contractor: _____Phone #: ( ) _____

Mailing Address: _____City: _____ State: _____ Zip Code: _____

Email: _____

WA Contractors License #: _____ City Business License **#:** _____

Project Location: _____ Tax Lot #:_____

Type of work: Non-Residential_____ Single Family/Town Home _____
Duplex/Condo_____ Multi-Family _____

Complete description of work to be performed (required, use separate sheet if needed).

_____
_____
_____
_____
_____

***See attached list for required fixture total sheet.**

I/we certify that the above information is correct and that the construction on, and the occupancy and use of, the above described property will be in accordance with the laws, rules, and regulations of the State of Washington and the City of Bingen.

Signature of Applicant: _____ Date: _____

Signature of Property Owner: _____ Date: _____

PERMIT #_____

City of Bingen

Plumbing Application List, required to be filled out by applicant

Irrigation:

Atmospheric Type not included above 1 to 5 Quantity_____
Atmospheric Type vacuum breaker over 5 Quantity_____
Backlfow other than ATVB 2 diameter or less Quantity_____
Backflow protection other than ATV over 2ò Quantity_____
Lawn sprinkler on any one meter Quantity_____

Gas Piping:

Gas piping each additional outlet over 5 Quantity_____
Gas piping system up to 5 outlets Quantity_____

Permit:

Plumbing permit issuance Quantity_____
Plumbing supplemental permit issuance Quantity_____

Water/Sewer Connection:

Sewer/Septic connection Quantity_____
Water service Quantity_____

Repairs or Alterations:

Alteration to water piping Quantity_____
Repair drain vent piping Quantity_____

Common Household Fixtures:

Basins-Lavatories Quantity_____
Bidet Quantity_____
Disposal Quantity_____
Hose Bibs Quantity_____
Laundry Tray Quantity_____
Rain-Drains Quantity_____
Sinks-Dishwashers Quantity_____
Tub/Shower Quantity_____
Urinal Quantity_____
Washing Machine Quantity_____
Water Closet Quantity_____
Water Heater Quantity_____

Miscellaneous:

Drinking Fountain Quantity_____
Floor Drain Quantity_____
Waste & Grease Interceptor Quantity_____