



**CITY OF COVINGTON**  
**Community Development Department**  
 16720 SE 271st Street • Suite 100 • Covington, WA 98042  
 Phone: (253) 480-2400 • Fax: (253)-638-1122  
 www.ci.covington.wa.us

A 103

# PLUMBING PERMIT APPLICATION

**PROJECT ADDRESS:** \_\_\_\_\_  
**PARCEL NUMBER:** \_\_\_\_\_  
**SUBDIVISION NAME:** \_\_\_\_\_ **LOT#** \_\_\_\_\_

**FOR STAFF USE ONLY**  
 Permit Number: \_\_\_\_\_  
 Application Date: \_\_\_\_\_

**PROJECT DESCRIPTION:** \_\_\_\_\_ **VALUATION: \$** \_\_\_\_\_  
**Type of Work:**  New  Addition  Alteration  Repair  Other: \_\_\_\_\_

**CONTRACTOR**  Applicant  
 Company: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 State Contractor's License #: \_\_\_\_\_  
 UBI #: \_\_\_\_\_

**PROPERTY OWNER**  Applicant  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

**TENANT**  Applicant  
 Company: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

Plumbing Units	No.	Fee,	Total
Bathtub		\$12	
Clothes washer		\$12	
Dishwasher		\$12	
Drinking fountain		\$12	
Floor drain		\$12	
Grease trap		\$12	
Hose bib		\$12	
Kitchen sink		\$12	
Laundry tub/tray		\$12	
Lavatory (bathroom sink)		\$12	
Shower		\$12	
Toilet/water closet		\$12	
Urinal		\$12	
<b>SUBTOTAL FIXTURES/TRAPS</b>		\$12	
Repair/alter drain waste, vent		\$12	
Building/trailer park sewer		\$22	
Water heater/vent (electric)		\$12	
Gas piping system (1-5 outlets)		\$10	
- Additional outlets, each		\$6	
Water piping/treatment, each		\$12	
Install drain waste/vent piping		\$12	
Lawn sprinkler system		\$12	
Vacuum breaker		\$10	
Backflow device, 2" or less/over		\$12/\$22	
Other:			
Issuance fee	1	\$37	\$37
Technology Surcharge	1	\$39	\$39
<b>TOTAL FEES</b>			

I **acknowledge** that an application for a permit for any proposed work that has not resulted in the issuance of a permit within 180 days of the date of filing shall be deemed to have been abandoned.

I **certify** that as a contractor I am currently registered and properly licensed as defined in RCW 18.27, or as a property owner, I am exempt from the requirements of the contractor registration and will do all my own work or use properly licensed subcontractors in connection with the work to be performed under this permit. I **certify** that I have read and examined this application and know the same to be true and correct, and that if any of the information provided is incorrect, the permit or approval may be revoked.

\_\_\_\_\_  
 Applicant's Signature

\_\_\_\_\_  
 Date