Folder/Permit No.
PP000 _ _ _

THE CORPORATION OF THE DISTRICT OF CENTRAL SAANICH

1903 Mt. Newton Cross Road Saanichton B.C. V8M 2A9 Phone (250) 544-4217 Fax (250) 652-4737 www.csaanich.ca

PLUMBING PERMIT Application

Project Info

Address	Date
Project Description	

Construction ❑ **New** ❑ **Addition/Reno** ❑ **Demolition** ❑ _____

Building Use ❑ **SFD** ❑ **Duplex** ❑ **Multi-Res.** ❑ **Commercial** ❑ **Industrial** ❑ _____

Sewer System ❑ **Sewer** ❑ **Septic System**

Owner

Name(s)		Telephone(s)
Address	City	Postal Code

Contractor

Name		Business Licence No. & Municipality
Address	City	Postal Code
Telephone(s)	Fax	T.Q. Number

If the homeowner is the plumbing contractor, isometric drawings of the complete plumbing system are required for the application. Plumbing AS-BUILT Drawings are required at Rough-In (or Framing) Inspection.

Fixtures

Complete number of fixtures to be installed.

	Quantity
Bar Sink	
Basin	
Bathtub Or Shower Unit	
Clothing Washer	
Dishwasher	
Hot Water Tank	
Kitchen Sink	
Laundry Tub	
Water Closet	
Other	
Total Fixtures	

	Quantity
SFD Service Laterals*	
SFD RWL/Drainage*	
Area Sump/Catch Basin	
Grease Trap	
Irrigation System	
Swimming Pool	
Standpipe Hose Outlets	
Fire Sprinkler Heads	
Sewer/Drain/Water Lateral	
Floor Drains	

* *Usually charged with Building Permit*

This information is collected for the administrative and/or operational functions of the District of Central Saanich as authorized by the Local Government Act, and will be used and maintained in accordance with the Freedom of Information and Protection of Privacy Act.

Revised April 2008