

585 EAST 222ND STREET, EUCLID, OHIO 44123-2099

www.cityofeuclid.com

RESIDENTIAL PLUMBING BUILDING PERMIT

PROJECT ADDRESS:			
PROPERTY OWNER:	EMAIL:		
PROPERTY OWNER ADDRESS:		STATE	_ ZIP
OWNER PHONE:	All fields in this box must be comp	<mark>oleted.</mark>	

ADDRESS:	-

PROJECT DETAILS			
ESTIMATED COST:			
IS THIS PERMIT ASSOCIATED WITH A GENERAL CONSTRUCTION PERMIT? IF YES, PROVIDE THE PERMIT #:	YES	NO	
ARE THERE ATTACHED PLANS WITH THE APPLICATION?	YES	NO	

DESCRIPTION OF WORK:		



585 EAST 222ND STREET, EUCLID, OHIO 44123-2099

www.cityofeuclid.com

PLEASE MARK ALL APPLICABLE ITEMS

NEW PLUMBING, WATER SERVICE AND/OR SEWER SYSTEM(S)	YES/NO
ADDITIONS OR ALTERATIONS TO PLUMBING, WATER SERVICE	YES/NO
AND/OR SEWER SYSTEM(S)	_
PLUMBING, WATER SERVICE AND/OR	
SEWER SYSTEM(S)ADD-ONS:	
ADD-ON PER EACH PLUMBING FIXTURE OR PLUMBING	
APPLIANCE	
NUMBER OF HOT WATER TANKS, TANKLESS WATER HEATERS OR	
BOILERS (BOILER PERMIT REQUIRED FOR BOILERS)	
NUMBER OF WATER CONNECTIONS/DISCONNECTIONS TO A	
LATERAL, MAIN OR BRANCH OF A MAIN	
NUMBER OF SEWER CONNECTIONS/DISCONNECTIONS TO A	
LATERAL, MAIN OR BRANCH OF A MAIN	
WILL THERE BE A STORM OR SANITARY SEWER SYSTEM THAT IS	YES/NO
PART OF A DRIVEWAY REPAIR, GARAGE SLAB REPAIR,	
FOUNDATION REPAIR OR SITE LATERAL?	
WILL THERE BE NEW CONSTRUCTION OF; ADDITION TO;	YES/NO
ALTERATION TO; REPLACEMENT OF; FUEL GAS SYSTEMS	
NUMBER OF APPLIANCE OPENINGS	

I hereby certify all information contained in this application is true, accurate and complete to the best of my knowledge. This application shall be considered in agreement on the part of the applicant or his agents to comply with the Building and Zoning codes of the City of Euclid and the State of Ohio. I further agree to comply with all required inspections related to this permitted work.

Applicant Signature

Applicant Printed Name

Date

Applicant Email

Applicant Phone