



South Central Planning District

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*R.M. of Victoria
 R.M. of South Norfolk
 R.M. of Lorne
 Town of Treherne
 Village of Somerset
 Village of Notre Dame de Lourdes*

PLUMBING PERMIT

PERMIT DATE: _____ **PERMIT NO.:** _____

PERMIT FEE: \$ _____ **CHEQUE NO.:** _____

APPLICANT NAME: _____ **PHONE:** _____

APPLICANT ADDRESS: _____ **FAX:** _____

_____ **CELL:** _____

_____ **WORK:** _____

_____ **EMAIL:** _____

GENERAL DESCRIPTION OF WORK:

LOCATION OF WORK: _____

LEGAL DESCRIPTION: _____

OWNER: _____ **ADDRESS:** _____ **PHONE:** _____

CONTRACTOR: _____ **ADDRESS:** _____ **PHONE:** _____

OTHER: _____ **ADDRESS:** _____ **PHONE:** _____

WATER AND SEWER SERVICE CONNECTIONS: NEW _____ EXISTING _____

WATER LINE: SIZE _____ TYPE OF MATERIAL _____

SEWER LINE: SIZE _____ TYPE OF MATERIAL _____

	Water Closet	Urinal	Bidet	Bath Tub	Shower	Lavatory	Sink-Kitchen	Sink-Bar	Sink-Slop	Sink-Janitor	Sink-3 compartment	Sink-Auxiliary	Autopsy Table	Dental Table	Dishwasher	Drinking Fountain	Laundry Tray	Potato Peeler	Floor Drain
Basement																			
First																			
Second																			
Third																			
Other																			

Applicant's Copy
 Office Copy
 File Copy
 Municipal Copy