

Cypress Planning District

122 Main St. Box 1000 Carberry, Mb R0K 0H0

Phone: (204) 834-6618

Email: inspector@cypressplanningdistrict.com

| For Office Use    |  |
|-------------------|--|
| Building Permit # |  |
| Plumbing Permit#  |  |
| Roll #            |  |

APPLICATION FOR PLUMBING PERMIT

|                      |  |
|----------------------|--|
| Description of work: |  |
|----------------------|--|

|                            |  |
|----------------------------|--|
| Address/Legal Description: |  |
|----------------------------|--|

|                  |  |        |  |
|------------------|--|--------|--|
| Applicant        |  |        |  |
| Mailing Address: |  |        |  |
| Phone Number:    |  | Email: |  |

|                  |  |        |  |
|------------------|--|--------|--|
| Owner            |  |        |  |
| Mailing Address: |  |        |  |
| Phone Number:    |  | Email: |  |

|                  |  |        |  |
|------------------|--|--------|--|
| Contractor       |  |        |  |
| Mailing Address: |  |        |  |
| Phone Number:    |  | Email: |  |

| Building Type |                     | Single Unit Dwelling          |                 |          |                 |          |                   |                | Multi Unit Dwelling (# of Units) |             |                         |                     |                      |        |       |                        |  |
|---------------|---------------------|-------------------------------|-----------------|----------|-----------------|----------|-------------------|----------------|----------------------------------|-------------|-------------------------|---------------------|----------------------|--------|-------|------------------------|--|
|               |                     | Commercial - Name of Business |                 |          |                 |          |                   |                |                                  |             |                         |                     |                      |        |       |                        |  |
|               |                     | Secondary Suite/Garden Suite  |                 |          |                 |          |                   |                | Other                            |             |                         |                     |                      |        |       |                        |  |
| Floor         | Bath Tub/<br>Shower | Washing<br>Machine            | Water<br>Closet | Lav Sink | Kitchen<br>Sink | Bar Sink | 3 Compart<br>Sink | Janitor<br>Mop | Laundry<br>Tub                   | Floor Drain | Comm.<br>Dish<br>washer | Eye wash<br>Station | Drinking<br>Fountain | Urinal | Misc. | Back<br>Water<br>Valve |  |
| Basement      |                     |                               |                 |          |                 |          |                   |                |                                  |             |                         |                     |                      |        |       |                        |  |
| 1st Floor     |                     |                               |                 |          |                 |          |                   |                |                                  |             |                         |                     |                      |        |       |                        |  |
| 2nd Floor     |                     |                               |                 |          |                 |          |                   |                |                                  |             |                         |                     |                      |        |       |                        |  |
| 3rd Floor     |                     |                               |                 |          |                 |          |                   |                |                                  |             |                         |                     |                      |        |       |                        |  |
| 4th Floor     |                     |                               |                 |          |                 |          |                   |                |                                  |             |                         |                     |                      |        |       |                        |  |
| Other         |                     |                               |                 |          |                 |          |                   |                |                                  |             |                         |                     |                      |        |       |                        |  |
| Total         |                     |                               |                 |          |                 |          |                   |                |                                  |             |                         |                     |                      |        |       |                        |  |

Fixtures not requiring a permit: Sump Pit, Grit/Grease/Oil Interceptor, garage floor drains

FEES

|                 |  |                                      |           |    |
|-----------------|--|--------------------------------------|-----------|----|
| Total Fixtures: |  | X \$20.00/Fixture + ( \$80 Base fee) | Total fee | \$ |
|-----------------|--|--------------------------------------|-----------|----|

Pursuant to the provisions of the latest edition of the Manitoba Plumbing Code and any amendments thereto, the undersigned hereby applies to the Building Inspector for a permit to construct, extend, alter, renew or repair or make a connection to a sewer, as described below, the plumbing and drainage system in the premises listed.

Electronic Communicaton - If I provide the Cypress Planning District with a fax number, email address, cell phone number or contact information for any other electronic medium, by signing this application I consent to authorize the Cypress Planning District to communicate with me electronically via that medium.

|              |  |            |  |           |  |           |  |
|--------------|--|------------|--|-----------|--|-----------|--|
| Signature    |  |            |  | Date      |  |           |  |
| Payment Type |  | Cheque No. |  | Date Paid |  | Receipt # |  |