



# Township of Falls

188 Lincoln Highway, Fairless Hills, PA 19030  
Office of Code Enforcement(215) 949-9000 ext. 257, 262, 256, 201

# PLUMBING PERMIT

RECEIVED BY: \_\_\_\_\_ PERMIT # \_\_\_\_\_

COST OF PLUMBING \$ \_\_\_\_\_

**MUST HAVE A CLEAR DETAIL ON SCOPE OF ALL WORK BEING PERFORMED**

IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG #: 1-800-242-1776, MINIMUM OF 3 DAYS BEFORE YOU DIG

Work Site Location \_\_\_\_\_ Lot# \_\_\_\_\_

Model # of Hot Water Heater \_\_\_\_\_

Owner Name (Printed) \_\_\_\_\_

Owner Signature \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

Contractor \_\_\_\_\_

Address \_\_\_\_\_

Telephone(\_\_\_\_) \_\_\_\_\_

Falls Township License \_\_\_\_\_ PA License \_\_\_\_\_

### PLUMBING CHARACTERISTICS:

Building: \_\_\_\_\_ Public Sewer \_\_\_\_\_ Private Septic \_\_\_\_\_  
Water Service: \_\_\_\_\_ Public Water \_\_\_\_\_ Private well \_\_\_\_\_

ZONING APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Plumbing Review \_\_\_\_\_ Date \_\_\_\_\_

CONTACT INFORMATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

_____	Dishwasher
_____	Drinking Fountain
_____	Garbage Disposal
_____	Hot Water Heater
_____	Sewer Connection
_____	Sewer Repair
_____	Washer
_____	Water Service Connection
_____	Water Service Repair

_____	Backflow Preventer
_____	Bathtub /Whirlpool Tub
_____	Emergency Shower/Eyewash
_____	Floor Drain
_____	Grease Trap
_____	Hose Bib
_____	Interceptor/Separator
_____	Roof Drains
_____	Sewer Pump
_____	All Sinks
_____	Shower
_____	Sump pump
_____	Toilet(s)
_____	Urinal/Bidet
_____	Other
_____	Other

**CONTRACTOR SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

FIRE SPRINKLER: YES \_\_\_\_\_ NO \_\_\_\_\_ USE GROUP \_\_\_\_\_ CONSTRUCTION TYPE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

FLOOD ZONE: YES \_\_\_\_\_ NO \_\_\_\_\_ revised 7/14/2017