

Plumbing Verification Checklist

This information sheet has been prepared to assist individuals to complete plumbing permit applications with minimal delay. Plumbing permit applications must be accompanied by plans, specification and documentation which will be considered by the Chief Building Official in determining whether a plumbing permit will be issued.

Permit applications will be considered incomplete if the application is not accompanied by answers to the following questions:

| Project Information | | | | |
|--|---------------------------------|--|---|----|
| Building Address (Number and Street name) | Plumbing Permit Application No: | Date: | | |
| Home Owner Declaration (where applicable) | | | | |
| <p>I _____ (Owner) confirm that this application is for a single dwelling unit which I own and occupy, or am building to own and occupy. I shall be performing all of the Plumbing works involved with this application myself, and am responsible for all testing, certification, inspections, liability, and corrections which may be required by any authorities having jurisdiction. If, at any time, during the course of construction, I hire or contract with any other person or company to do any plumbing works pertaining to this project, I shall contact the City immediately, in writing, and provide verification and city license number of those hired or contracted.</p> | | | | |
| Current Address: | Signature: | Email: | | |
| | | Phone: | | |
| Plumbing Contractor Information | | | | |
| | | Licensed Plumber is: | Certified Backflow Installer and Tester | |
| Plumbing Company Name: | Plumbing Company Address: | Email: | | |
| | | Phone: | | |
| Contractor Name: | Contractor City License No.: | Contractor Signature (if not applicant): | | |
| Master Plumber Name: | Master City License No.: | Master Plumber Signature (if not applicant): | | |
| Scope of Work | | | | |
| Please check (✓) yes or no to the following Questions: | | | Yes | No |
| 1. Does this application include the installation of a Storm Sewer Lateral? Material Type: _____ Material Size: _____ New: Alteration/Repair: | | | | |
| 2. Does this application include the installation of a Sanitary Sewer Lateral? Material Type: _____ Material Size: _____ New: Alteration/Repair: | | | | |
| 3. Does this application include the installation of a Backwater Valve? Storm: Sanitary: | | | | |
| 4. Does this application include the installation of a Water Service? Material Type: _____ Material Size: _____ Tracer wire: _____ | | | | |
| 5. Does this application include the installation of a Backflow Preventer in compliance with B64.10-11 and all other codes? Type of backflow: _____ Check box if part of City's cross connection program: | | | | |
| 6. Is there an existing or new water based fire protection system (standpipe and/or sprinkler) in the Building? | | | | |
| 7. Have you called for Utility Locates (Gas, Hydro, Bell, Cogeco etc.) | | | | |
| Applicant Declaration | | | | |
| <p>I _____ declare that:</p> <p style="margin-left: 40px;">(print name)</p> <ol style="list-style-type: none"> 1. I am the owner/authorized agent of the owner named in the application for permit 2. The information contained in this checklist, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. 3. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. 4. I confirm that the City will be contacted immediately in writing if I become disengaged from the project listed. | | | | |
| _____ | | _____ | | |
| Date | | Signature of Applicant | | |