

## PLUMBING PERMIT APPLICATION

CITY OF URBANA BUILDING SAFETY DIVISION 400 S. VINE STREET, URBANA, IL 61801 217-384-2443 OR FAX 217/384-0200

DATE:	ADDRESS OF WORK :
APPLICANT:	PROPERTY OWNER:
ADDRESS:	ADDRESS:
TELEPHONE:	TELEPHONE:
TELET HONE.	
DESCRIPTION OF WORK:	
□ NEW WORK	☐ ALTERATION/REPAIR
BUILDING USED AS:	
□ COMMERCIAL	□ RESIDENTIAL
*WORK TO BE PERFORMED	
QUANTITY DESCRIPTION Water Closet	QUANTITY DESCRIPTION Floor Drain
	Hub/Stand-Pipe Drain
Urinal Lavatory	Drinking Fountain
Shower/Bath Tub	Clothes Washer
Kitchen Sink	Sewage Ejector
Utility/Service Sink	Waste Interceptor/Separator
Laundry Sink	Sonitary Sower
Bar/Beverage Sink	Sanitary Sewer Water Service
Floor Sink/Receptor	Water Heating Equipment/Vessel
Restaurant/Culinary Sink	Fire Safety Sprinkler (Ltd. Area)
Clinical Sink	Equipment Supply Backflow Preventer
Dishwasher	Special Fixture/Device/Piping
	Special Fixture/Device/Fipling
Garbage Disposal Other (description)	
Other (description)	
**ESTIMATED COST OF WORK	Total number of fixtures
	TOTAL FEE
\$ 50.00 minimum.)	
	and that all pertinent ordinances will be complied with in performing the work for
* Right-of-way permit must be issued by Public Wo	rks (706 South Glover Avenue, Urbana, IL 61802). A Fee will be required.
Applicant/Contractor Signature:	plumbprmtapp.doc – revised 620/2023