

Plumbing Permit Application



City of Cayce
South Carolina

ISSUE DATE: _____

BUILDING

Location/Address	Owner Name
Description of Proposed Work / Specific Use	

FIXTURES TO BE CONNECTED	DESCRIPTION	QUANTITY	FEE
Water Closets			
Urinals			
Sinks			
Bathtubs			
Slop Hoppers			
Hand Wash Basins			
Water Heaters			
Washing Machines			
Showers			
*Sewers New Installation [TAP FEE REQUIRED]			
*Sewer Repair by Owner			
Sewer Repair by Contractor			
Dishwashers			
Disposals			
Floor Drains and Other Traps			
Sprinkler System	(Master Plumber Card and Utility Department approval Required if connecting to City Line)		
*REPLACEMENT OF SEWER BY OWNER AND NEW SEWER LINE INSTALLATION REQUIRE UTILITY DEPT. APPROVAL		TOTAL	\$

TOTAL COST OF JOB	ESTIMATED DATE OF COMPLETION
-------------------	------------------------------

APPLICANT/CONTRACTOR

I hereby stipulate and agree that the work on the said sewer and plumbing fixtures connected therewith shall be in strict conformity with "An ordinance regulating and fixing the use of sewers by private parties in the City of Cayce." It is understood and agreed by the undersigned that the approval of this application does not constitute a privilege to violate the Building Code, Zoning Ordinance, or other Ordinances of the City of Cayce; and that any omission of, or misrepresentation of fact with or without intention of the undersigned, or any alteration of change from this application without the approval of the Building Official, shall constitute sufficient ground for the revocation of any permit issued which is based on the approval of this application.

Company Name	Applicant/Contractor Name	
Address		
Phone	License #	MP #
Signature		Date

FOR P&D OFFICE USE			
TMS #	Zoning	Issued By	Date
<input type="checkbox"/> Approved <input type="checkbox"/> Denied [Reason]		Approved/Denied By	Date
Flood Zone:	FIRM #:	Effective Date:	

FOR BUILDING OFFICIAL USE			
1 ST Inspection: _____	Date: _____	2 nd Inspection: _____	Date: _____
Final Inspection: _____	Date: _____	Remarks: _____	

FOR FINANCE OFFICE USE		
Receipt #	Date	Fee