



CITY OF IRWINDALE BUILDING AND SAFETY

APPLICATION NO.: _____

Disclaimer: Permits are public records and may be posted to the Internet for Public review.

APPLICATION FOR PLUMBING PERMIT / PLAN CHECK

JOB ADDRESS: _____ UNIT _____

CITY/LOCALITY: _____ APN: _____

SCOPE OF WORK:

PROPERTY OWNER

NAME: _____ OWNER BUILDER: YES NO

ADDRESS: _____ PHONE: (____) _____ - _____

CITY: _____ STATE/ZIP: _____ EMAIL: _____

APPLICANT INFORMATION (if different from owner)

NAME: _____

ADDRESS: _____ PHONE: (____) _____ - _____

CITY: _____ STATE/ZIP: _____ EMAIL: _____

CONTRACTOR INFORMATION

NAME: _____

ADDRESS: _____ PHONE: (____) _____ - _____

CITY: _____ STATE/ZIP: _____ EMAIL: _____

LICENSE #: _____ CLASSIFICATION: _____ EXP DATE: ____ / ____

WORK COMP CARRIER: _____ POLICY #: _____ EXP DATE: ____ / ____

ARCHITECT / ENGINEER / DESIGNER INFORMATION

NAME: _____

ADDRESS: _____ PHONE: (____) _____ - _____

CITY: _____ STATE/ZIP: _____ EMAIL: _____

STATE LICENSE #: _____ EXP DATE: ____ / ____

I, the applicant/owner of the property located as noted as project address, acknowledge that I am aware that if the Plumbing plans have been reviewed and I cannot obtain the necessary approvals from the other agencies, the fees paid to Building and Safety Division for plans will be forfeited. I understand that additional plan check fees will apply if the plans submitted are modified in order to obtain approvals from other agencies. Also, plan check is valid for one year; additional fees may be required after one year for renewal.

APPLICANT / OWNER SIGNATURE: _____ DATE: _____

PL01 BACKWATER VALVES	_____ Each	PL19 WATER HEATER	_____ Each
PL02 BACKFLOW PREV. DEVICE/SPRINKLER	_____ Each	PL20 WATER TREATING EQUIPMENT	_____ Sys(s)
PL03 BATHTUB / SHOWER	_____ Each		
PL04 CLOTHESWASHER (TRAY / STANDPIPE)	_____ Each	PL21 LOW PRES GAS SYSTEM W/<= 5 OUTLETS	_____ Sys(s)
PL05 DISHWASHER	_____ Each	PL22 ADDITIONAL LOW PRES. OUTLETS > 5	_____ Each
PL06 DRINKING FOUNTAIN	_____ Each	PL23 MED/HIGH PRESSURE GAS SYSTEM	_____ Sys(s)
PL07 FLOOR DRAIN	_____ Each	PL24 ADDITIONAL FEE FOR EACH OUTLET	_____ Each
PL08 FLOOR SINKS	_____ Each	PL25 GAS METER (PRIVATE)	_____ Mtr(s)
PL09 HOSE BIBB	_____ Each	PL26 GAS REGULATOR	_____ Reg(s)
PL10 INTERCEPTOR (CLARIFIER)	_____ Sys(s)		
PL11 LAVATORY / SINK	_____ Each	PL27 DRAINAGE/VENT PIPE REPAIR/ALT	_____ Sys(s)
PL12 MISCELLANEOUS FIXTURE	_____ Each		
PL13 PRESSURE REG.—PRV / WATER	_____ Each	PL28 GREYWATER SYSTEM	_____ Sys(s)
PL14 ROOF DRAIN	_____ Each		
PL15 SOLAR WATER HEATING SYSTEM	_____ Sys(s)	PL29 WATER PIPE REPLMNT (BRANCH / FIX)	_____ Each
PL16 SWIM POOL TRAP AND RECPTOR	_____ Sys(s)	PL30 OTHER WATER PIPINIG <=1 1/2 INCH	_____ Line(s)
PL17 TRAP PRIMER	_____ Sys(s)	PL31 OTHER WATER PIPING 2-3 INCH	_____ Line(s)
PL18 WATER CLOSET / URINAL / BIDETS	_____ Each	PL32 OTHER WATER PIPING OVER 3 INCH	_____ Line(s)

FOR BUILDING AND SAFTEY USE

PL33 ADDNL PC (COMB WASTE & VENT)	_____ Sys(s)	PL41 PC INVD GREYWATER SYSTEM	_____ Sys(s)
PL34 ADDNL PC EARTHQUAKE VALVE ONLY	_____ Each	PL42 SUPPLEMENTAL PLANCHECK FEE	_____ Hour(s)
PL35 ADDNL PC (CHEMICAL WASTE)	_____ Sys(s)	PL43 INVEST NO PERMIT R3 OWNER-BLDR	_____ Each
PL36 ADDNL PC (RAINWATER SYSTEM)	_____ Sys(s)	PL44 INVESTIGATION FEE (OTHER OCC)	_____ Each
PL37 PC INVD COMBO WASTE & VENT	_____ Sys(s)	PL45 NON-COMPLIANCE (R-3 OCCUPANCY)	_____ Each
PL38 PC INVD EARTHQUATE VALVE GAS SY	_____ Each	PL46 NON-COMPLIANCE (OTHER OCCUPANCY)	_____ Each
PL39 PC INVD CHEMICAL WASTE SYSTEM	_____ Sys(s)	PL47 BOARD OF APPEALS FEE	_____
PL40 PC INVD RAINWATER SYSTEM	_____ Sys(s)	PL48 PC ALT MTL/MTH/MDF 1ST CRG 2HR MIN.	_____ Hour(s)