TOWN OF SPRING LAKE PLUMBING PERMIT APPLICATION

Email Permit to: shutchins@townofspringlake.com

PERMIT NO: P- _____

Complete address where work will be performed: _____
Spring Lake, NC 28390

Permit to be issued to: (Contractor/Business Name) _____

Address: _____ Phone: _____

NC License Number: _____ Email: _____

Complete Name of Property Owner: _____

Property Owner's Address: _____

Property Owner's Phone Number: _____

Class of Work: New: _____ Addition: _____ Replacement: _____ Other: _____

Item	No:	Price	Item	No:	Price
Ant siphon Device/Arrestors			Lift Station		
Back Flow/Vacuum Device			Septic Tank/Pit		
Bathtub			Sewer Connection		
Bidet			Shower		
Boiler			Kitchen/Bathroom Sinks		
Clothes Washer			Slop Sink		
Dishwasher			Swimming Pool		
Drink Fountain			Temporary Water		
Floor Drain			Trap Primer		
Floor Sink			Urinal		
Gas Appliances			Walk in Cooler/Freezer		
Gas Piping			Waste/Sand Intercept		
Grease Intercept			Water Closet		
Hot Tub			Water Heater		
Icemaker			Water Piping		
Lavatory			Whirlpool		
Other			Other		

**A minimum permit fee will be charged if priced items total less then the minimum permit fee.

Permit Fee $ _____
Technology Fee $ 10.00
Convenience Fee (All Card Transactions $4.50) $_____
Total Permit Fees $_____

Description: _____

_____

YOU MUST CALL TO SCHEDULE AN INSPECTION AT THE PROPER STAGE (S) OF WORK. CALL THE INSPECTIONS DEPARTMENT AT (910) 985-7265 TO SCHEDULE AN INSPECTION. This permit becomes null and void if authorized work is not commenced within six (6) months from the date of issue, or if construction is suspended or abandoned for a period of one (1) year, any time after work is commenced.

The undersigned hereby makes an application for a permit and inspection of the work described and agrees to comply with all applicable laws regulating the work performed.

Signature of Applicant _____ Date _____

Print Name _____

Approved by _____ Date _____