



Inspection and Technical Services

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ITS BC Form - 26

PLUMBING PERMIT APPLICATION

The undersigned hereby applies for a Permit authorizing the occupancy of the following premises:

Instructions: **PRINT CLEARLY:** 1) Appropriate fee must accompany application; 2) Make Cheque or Money Order payable to the Minister of Finance (Do NOT send cash in mail)

LOCATION OF BUILDING:																							
(No. or Section)				(Street or Township)				(City or Town or Range)				(Municipality)											
BUILDING NAME: _____																							
BUILDING SIZE: _____																							
CLASS OF WORK																							
1) NEW <input type="checkbox"/>				3) REPAIR <input type="checkbox"/>				5) ALTERATION <input type="checkbox"/>				2) ADDITION <input type="checkbox"/>				4) RENOVATION <input type="checkbox"/>				6) OTHER (SPECIFY) <input type="checkbox"/>			
MAJOR OCCUPANCY						BUILDING PERMIT NO.:						NEW OR REVISION											
NO. OF DWELLING UNITS						NO. OF OTHER UNITS						NO. OF STOREYS											
AREA OF ROOF AND PAVED SURFACE TO BE DRAINED										SIZE OF HOUSE DRAIN AND TRAP													
APPLICANT:						ADDRESS																	
PHONE () -						POSTAL CODE						EMAIL:											
OWNER:						ADDRESS																	
PHONE () -						POSTAL CODE						EMAIL:											
ARCHITECT OR DESIGNER:						ADDRESS																	
PHONE () -						POSTAL CODE						EMAIL:											
CONTRACTOR:						ADDRESS																	
PHONE () -						POSTAL CODE						EMAIL:											
NUMBER AND LOCATION OF FIXTURES (TRAPS)																							
FLOOR	FIXTURES	WATER CLOSETS	BATH TUBS	BASINS	KITCHEN SINKS	LAUNDRY TUBS	AUTO WASHERS	SHOWERS	URINALS							FLOOR DRAINS	ROOF TERMINALS	FEES					
BASEMENT	FIXTURES																						
1ST	FIXTURES																						
2ND	FIXTURES																						
3RD	FIXTURES																						
4TH	FIXTURES																						
<i>For Additional Stories Please Itemize On Separate Sheet</i>																							
Signature of Applicant _____														Date _____									

WHEN PROPERLY VALIDATED (in this space) THIS IS YOUR PERMIT

Assignment

Date: _____
Validated By: _____

Plumbing Permit #: **-P**

1 - OFFICE COPY; 2 - CONTROL COPY; 3 - APPLICANT'S COPY