



City of South Euclid Building Department
 1349 South Green Road, South Euclid, Ohio 44121
 Tel. 216-381-0400 Fax 216-291-4959

Application for Plumbing, Water, Sewer, Fuel Gas System(s) Permit

Contractor / Applicant: _____ Date: _____
 Project Address: _____
 Owner's Name & Phone #: _____
 Description of Work: _____ Estimated Cost: _____
 Residential: _____ Commercial: _____ Total Sq.Ft. _____ Check#: _____ Cash: _____ Res/Com'l

	Quan	Unit	Total
New Construction of; Addition to; Alteration to; Plumbing, Water Service, & Sewer Systems (base fee)		35.00 / \$40.00	
A.) + per each Plumbing Fixture Residential / Commercial		5.00 / \$6.00	
Plumbing Fixture: A receptacle or device that is either permanently or temporarily connected to the water distribution system of the premises & demands a supply of water there from; discharges waste water, liquid-borne waste materials or sewage either directly or indirectly to the drainage system of the premises; or requires both a water supply connection and a discharge to the drainage system of the premises.			
<input type="checkbox"/> Bathtub <input type="checkbox"/> Dishwasher <input type="checkbox"/> Floor Drain <input type="checkbox"/> Floor Sink <input type="checkbox"/> Garbage Disposal <input type="checkbox"/> Grease Trap <input type="checkbox"/> Interceptor <input type="checkbox"/> Laundry Tray <input type="checkbox"/> Lavatory <input type="checkbox"/> Service Sink <input type="checkbox"/> Shower <input type="checkbox"/> Sink <input type="checkbox"/> Urinal <input type="checkbox"/> Water Closet <input type="checkbox"/> Water Cooler <input type="checkbox"/> Other			
B.) + per each Plumbing Appliance Residential / Commercial		3.50 / \$4.50	
Plumbing Appliance: Any one of a special class of plumbing fixtures intended to perform a special function. Included are fixtures having the operation or control dependent on one or more energized components, such as motors, controls, heating elements, pressure or temperature-sensing elements. Such fixtures are manually adjusted or controlled by the owner or operator, or are operated automatically through one or more of the following actions: a time cycle, a temperature range, a pressure range, a measured volume or weight.			
<input type="checkbox"/> Backflow Device <input type="checkbox"/> Booster Pump <input type="checkbox"/> Hot Water Heater <input type="checkbox"/> Humidifier <input type="checkbox"/> Water Storage Tank <input type="checkbox"/> Water Tempering <input type="checkbox"/> Other			
per each New Water Connection/Disconnection to a lateral, Main or Branch of a Main - Res / Com'l		\$25.00 / \$35.00	
per each New Sewer Connection/Disconnection to a lateral, Main or Branch of a Main - Res / Com'l		\$50.00 / \$60.00	
New Construction of; Addition to; Alteration of; Fuel Gas System(s) - (base fee) - Res / Com'l		\$30.00 / \$40.00	
A.) + per each Appliance Opening - Residential / Commercial		\$4.00 / \$5.00	
B.) Systems required to comply with the Ohio Administrative Code 4104:8 - Pressure Piping		no charge	
Note: Those required to obtain a permit from the Pressure Piping Bureau are required to provide the Building Dept. of the City of South Euclid with a copy of such permit and all inspections performed by the Ohio Pressure Piping Bureau relative to such permit. *			
Repair of Plumbing; Water; Sewer; Fuel Gas Systems - per structure - Res / Com'l		\$35.00 / \$45.00	
Storm Sewer that is part of a driveway repair, garage slab repair, foundation repair - Res / Com'l		\$15.00 / \$25.00	
SUBTOTAL			
+ Board of Building Standards Tax Assessment : 1% Residential - 3% Commercial			
TOTAL			

All fees are non-refundable

The acceptance of the permit herein applied for shall constitute an agreement on part to abide by all the conditions of the City of South Euclid Ordinances of the Law of the State of Ohio relating to the work to be done hereunder. It is further a condition that failure to adhere to these ordinances and/or laws or any falsification of the information herein shall result in revocation of this or any other permit relating to this proposed building.

Name (please print) _____
 Telephone # _____ Signature _____
 Fax# _____ Address _____
 Email _____ City, State, Zip Code _____