

**ST. JOSEPH COUNTY/SOUTH BEND BUILDING DEPARTMENT**  
**125 S. LAFAYETTE BLVD. SUITE 100**  
**SOUTH BEND, INDIANA 46601**  
**Phone: 574-235-9554/Fax: 574-235-5541**

## APPLICATION FOR PLUMBING PERMIT

DATE: _____	PERMIT NO. _____
TOWNSHIP: _____	ZONING: _____
OWNER'S NAME: _____	PHONE: _____
MAILING ADDRESS: _____	

PROPERTY LOCATION: \_\_\_\_\_  
 \_\_\_\_\_

Qty.	Description	Amount	Fees Owed
	Plumbing fixtures/drains/traps: _____		
	Backflow Protection		
	Building Sewer: Under 100' _____ Over 100' _____		
	Building Water: Under 100' _____ Over 100' _____		
	Water Softener(s)		
	Drain within building for rainwater system		
	Water Heater(s)		
	Gas Reconnection _____ Gas outlet(s) _____		
	Repair or alteration of drainage or vent piping		
	Drywells		
	Lawn Sprinkler Systems		
	Fire Protection Sprinkler system/Number of Heads: _____		
	Gas Tank(s) and Pump(s)		
	Back-up generator-gas line: 10 Kv or less _____ Over 10 Kv _____		
	Other:		
	<b>MINIMUM PERMIT FEE: \$30.00</b>	<b>Total:</b>	

It is hereby certified that the work herein called for is in accordance with the provisions of the Plumbing Codes of St. Joseph County and the City of South Bend, Indiana.

Plumbing Contractor: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

\*\*See Fee Schedule for permit fees