



**TOWN OF WINTERVILLE
INSPECTION DEPARTMENT**

PLUMBING PERMIT

2936 CHURCH ST.

FAX: 252-756-6647

INSPECTIONS LINE: 252-215-2419

DATE _____ PERMIT # _____ LICENSE # _____

PLUMBING CONTRACTOR _____

COMPANY ADDRESS _____

PHONE # _____ E-MAIL _____

JOB ADDRESS _____

OWNER _____ PHONE # _____

NUMBER OF PLUMBING FIXTURES

Number of each type of fixture:

_____ Water Closets _____ Bathtubs (Including Whirlpools) _____ Lavatories

_____ sinks (Including Laundry Trays) _____ Showers _____ Urinals

_____ Washing Machines _____ Water Heaters _____ Floor Drains

_____ Drinking Fountains _____ Sewer Line _____ Service Water Line

_____ Gas Line _____ Sprinkler System

_____ Water Heater Change Out (Location) _____

_____ Gas off 6 Months (Location) _____

Applicant: _____