

Application for

**PLUMBING and GAS PERMIT**



Office Use Only

PLUMBING A/P #: \_\_\_\_\_

BUILDING A/P #: \_\_\_\_\_

Received by I&P: \_\_\_\_\_ Date: \_\_\_\_\_

Calvert County Inspections & Permit Division, 150 Main Street, Floor 3, Suite 335, Prince Frederick, MD 20678  
 (410) 535-2155 (410) 535-2156 (410) 535-1600 (301) 855-1243 Fax (410) 414-3283

**PROPERTY OWNER INFORMATION**

Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**PROPOSED PROJECT LOCATION INFORMATION**

Project Name: \_\_\_\_\_ Unit/Suite #: \_\_\_\_\_ Lot #: \_\_\_\_\_  
 Site Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Directions to Site: \_\_\_\_\_

**CONTRACTOR INFORMATION**

Company Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Name of Plumbing Contractor: \_\_\_\_\_  
 Calvert County License #: \_\_\_\_\_ State License #: \_\_\_\_\_ Backflow Preventer #: \_\_\_\_\_

**PROPOSED PROJECT INFORMATION**

**DESCRIPTION OF PROPOSED WORK:**  
 \_\_\_\_\_  
 \_\_\_\_\_

**CHECK ALL THAT APPLY**

<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> Non-Profit Organization	
<input type="checkbox"/> Fire Restoration	<input type="checkbox"/> Natural Disaster		
<input type="checkbox"/> New Construction	<input type="checkbox"/> Renovate / Repair / Remodel	<b>TYPE OF STRUCTURE:</b>	
<input type="checkbox"/> Plumbing ONLY	<input type="checkbox"/> Plumbing and Gas	<input type="checkbox"/> Gas ONLY	
<b>GAS CONNECTIONS:</b>	<input type="checkbox"/> L.P	<input type="checkbox"/> Natural	<input type="checkbox"/> Medical Gas
<input type="checkbox"/> Grease Trap Installation	<input type="checkbox"/> Trenched		
<b>SEWERAGE CONNECTIONS:</b>	<input type="checkbox"/> New	<input type="checkbox"/> Existing	<input type="checkbox"/> Public <input type="checkbox"/> Private
<b>WATER CONNECTIONS:</b>	<input type="checkbox"/> New	<input type="checkbox"/> Existing	<input type="checkbox"/> Public <input type="checkbox"/> Private

Fixture	R				Gas ✓	Fixture	R				Gas ✓
	B	1	2	3			B	1	2	3	
AC w/ Drain						Laundry Tray					
Backflow Preventer						Lavatory					
Bath Tub						Oven					
Boiler						Pressure Valve Break					
Check Valve						Range Top					
Check Valve, Dbl Assemb						RPZ Valve					
Dishwasher						Sewerage Ej Pump					
Drinking Fountain						Shower - Fiberglass					
Dryer						Shower - Tile					
Fireplace						Sink					
Fire Pump						Slop Sink					
Floor Drain						Storage Tank A/G					
Fryer						Storage Tank U/G					
Furnace						Sump Pump					
Generator						Urinal					
Grease Trap						Wash Machine					
Grill						Water Closet					
Hose Faucet						Water Service					
Hot Water Heater						Water Softener					
Hydrant											
Ice Maker											
Irrigation											
<b># Plumbing Fixtures</b>	<b># Rough-In Fixtures Only</b>				<b># Gas Fixtures</b>	<b># Total Fixtures</b>					

**INCOMPLETE/INCORRECT APPLICATIONS WILL NOT BE ACCEPTED AND/OR NOT APPROVED**

I am authorized by the owner to do the work herein described, and in the execution thereof, I agree to abide by the rules and regulations of the Plumbing Board of Calvert County. I further agree to request all necessary inspections including FINAL inspection.

SIGNATURE OF MASTER PLUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_  
 PRINT NAME: \_\_\_\_\_  
 Approved by the Calvert County Plumbing Inspector:  
 SIGNATURE OF PLUMBING INSPECTOR: \_\_\_\_\_ DATE: \_\_\_\_\_

**PERMITS EXPIRE 2 YEARS AFTER ISSUANCE UNLESS THE PROJECT IS UNDER CONTINUOUS CONSTRUCTION**