



INTERIOR PLUMBING PERMIT

***Mandatory fields must be filled out or process may be delayed**

Contractor Information

*Name: _____ *Phone #: _____
*Mailing Address: _____ *Email: _____
*Contact Person: _____ Fax: _____

Project/Work Description

*Property Owner Name: _____
*Civic Address (include Apt/Suite #): _____
*Choose 1 of following options: Single Detached Dwelling Secondary Suite
 Commercial – Name of Business: _____ Multi Unit Dwelling (# of Units) _____

Interior Plumbing

Fixtures	Basement	1 st Floor	2 nd Floor	3 rd Floor	4 th Floor	Other
Bath Tub/Shower						
Laundry Tray						
Water Closet						
S I N K S	Lavatory					
	Kitchen					
	Bar					
	3 Compartment					
	Janitor/Mop					
	Laundry Tub/Basin					
Floor Drain						
Roof Drain						
Commercial Dishwasher						
Eye Wash Station						
Drinking Fountain						
Urinal						
Bidet						
Miscellaneous						
Sump Pit or BWV		For new construction projects only				
Sump Pit		All other applications				
Back Water Valve (BWV)		All other applications				
Grit/Grease/Oil Interceptor						
Testable Backflow Prevention Device (with test cocks)						
Hose Bibbs						

Fees

Total Fixtures: _____ @ \$26.00 (min. fee \$74.00) \$ _____
 Grit/Grease/Oil Interceptor @ \$105.00 \$ _____
 Sump Pit and/or Backwater Valves (All other applications) @ \$105.00 \$ _____
 Hose Bibbs 1-3 @ \$26.00 each above 3 @ \$8.00 \$ _____
 Testable Backflow Prevention Device (with test cocks) First Device @ \$78.00 \$ _____
Each additional @ \$26.00 \$ _____
TOTAL \$ _____

Pursuant to the provisions of the latest edition of the Manitoba Plumbing Code, and amendments thereto, the undersigned hereby applies for a permit under the said By-law to construct, reconstruct, renew, or extend, as described, the plumbing and drainage system in the premises listed. Fees noted are subject to change in compliance with the City of Brandon Fees By-Law.

Applicant/Contractor Signature

*Date

******24 HOURS NOTICE IS REQUIRED FOR INSPECTIONS******