Township of Falls

188 LINCOLN HIGHWAY, FAIRLESS HILLS, PA 19030
OFFICE OF CODE ENFORCEMENT 215-949-9000 EXT. 257,262,256,201

RECEIVED BY: _____ PERMIT #: _____

PLUMBING PERMIT

COST OF PLUMBING $_____

MUST HAVE A CLEAR DETAIL ON SCOPE OF ALL WORK BEING PERFORMED
WHEN CHANGING CONTRTACTORS, NOTIFY THIS OFFICE
CALL UTILITY DIG #1-800-242-1776, MINIMUM OF 3 DAYS BEFORE YOU DIG
PROVIDE MANUFACTURERS SPEC SHEETS WHERE APPLICABLE
ALL APPLICANTS ARE RESPONSIBLE FOR VERIFYING THE EXISTENCE AND LOCATION OF ANY EASEMENTS LOCATED ON THE PROPERTY. THE TOWNSHIP ASSUMES NO RESPONSIBILITY FOR DETERMINING WHETHER ANY PROPOSED STRUCTURE COMPLIES WITH ANY EASEMENT ON THE PROPERTY.

Work Site Location_____ Lot #_____

Owner Name (Printed)_____

Owner Signature_____

Telephone#_____

Contractor_____

Address_____

_____

Telephone #_____

Local Business License PA License

NEW_____ OR REPLACEMENT_____

_____ Dishwasher
_____ Drinking Fountain
_____ Garbage Disposal
_____ Hot Water Heater
_____ Sewer Connection
_____ Sewer Repair
_____ Washer
_____ Water Service Connection
_____ Water Service Repair

_____ Backflow Preventer
_____ Bathtub/Whirlpool Tub
_____ Emergency Shower/Eyewash
_____ Floor Drain
_____ Grease Trap
_____ Hose Bib
_____ Interceptor/Separator
_____ Roof Drains
_____ Sewer Pump
_____ Sinks (all)
_____ Shower
_____ Sump Pump
_____ Toilets/Urinal/Bidet
_____ Other
_____ Other

JOB SUMMARY/PLAN REVIEW (OFFICE USE ONLY)

ZONING APPROVAL_____ DATE _____

Plumbing Review_____ Date _____

Contact Information Name: _____

_____

_____

FLOOD ZONE: YES_____ NO_____FIRE SPRINKLER: YES____ NO

_____
CONTRACTOR SIGNATURE DATE
Phone #_____ Cell#_____

EMAIL ADDRESS: _____

USE GROUP:_____ CONSTRUCTION TYPE: _____

revised 7/18/2019