

**TYRRELL COUNTY, NORTH CAROLINA  
APPLICATION TO INSTALL PLUMBING**

PERMIT # \_\_\_\_\_

DATE \_\_\_\_\_

I HERBY MAKE APPLICATION TO TYRRELL COUNTY FOR PERMISSION TO INSTALL OR DO PLUMBING WORK AS DESCRIBED IN ACCORDANCE WITH THE N.C. BUILDING CODE, THE N.C. PLUMBING CODE AND TO ANY AMMENDMENTS TO THESE CODES.

**DESCRIPTION**

NAME OF PROPERTY OWNER/AGENT \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

LOCATION \_\_\_\_\_

CONTRACTOR NAME \_\_\_\_\_

CONTRACTOR LICENSE # \_\_\_\_\_

CONTRACTOR PHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

- |                          |        |                                      |            |
|--------------------------|--------|--------------------------------------|------------|
| TYPE OF BUILDING         | NEW( ) | OLD( )                               | ADDITON( ) |
| ( ) WATERCLOSETS/TOILETS | _____  | ( ) DRINDING FOUNTAINS               | _____      |
| ( ) BATH TUBS            | _____  | ( ) SEWAGE EJECTORS                  | _____      |
| ( ) SHOWERS              | _____  | ( ) FLOOR DRAINS                     | _____      |
| ( ) LAVATORIES           | _____  | ( ) GREASE TRAP                      | _____      |
| ( ) KITCHEN SINK         | _____  | ( ) HOUSE SEWER                      | _____      |
| ( ) URINALS              | _____  | ( ) CHANGE SEWER                     | _____      |
| ( ) CLOTHES WASHER       | _____  | ( ) SILL COCK                        | _____      |
| ( ) DISH WASHER          | _____  | ( ) SEPTIC TANK CONNECTION           | _____      |
| ( ) HOT WATER HEATER     | _____  | ( ) WATER PUMP CONNECTION            | _____      |
| ( ) OTHER                | _____  | ( ) WATER CONNECTION TO COUNTY METER | _____      |
|                          |        | ( ) SEWER CONNECTION TO COUNTY SEWER | _____      |

TOTAL FEE \$ \_\_\_\_\_

DESCRIPTION: \_\_\_\_\_

THE ABOVE WORK DESCRIBED IS MY OBLIGATION WITH THE PROPERTY OWNER, AGENT OR OCCUPANT AND WILL BE UNDER MY SUPERVISION AND JURISDICTION. I WILL BE ASSISTED IN THE PERFORMANCE OF THE WORK BY MY EMPLOYEES.

SIGNED: \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

PERMIT ISSUED # \_\_\_\_\_ DATE: \_\_\_\_\_

INSPECTED; DATE: \_\_\_\_\_ INSPECTOR \_\_\_\_\_

**WORK MUST START WITHIN SIX (6) MONTHS OF ISSUANCE OF PERMIT OR PERMIT WILL EXPIRE. IF, AFTER STARTING, THE WORK IS DICONTINUED FOR A PERIOD OF 12 MONTHS, THIS PERMIT IMMEDIATELY EXPIRES.**