



**The City of Canal Winchester**  
 45 E Waterloo Street, Canal Winchester, Ohio 43110  
 614-837-7501

**Permit #** \_\_\_\_\_  
**Issue Date** \_\_\_\_\_  
**Amount Paid** \_\_\_\_\_

**FOR INSPECTIONS CALL 614-525-3160**

Date \_\_\_\_\_

**APPLICATION FOR INSPECTION OF COMMERCIAL PLUMBING**

The undersigned hereby applies for a permit to do plumbing and an inspection of same at the following location and in accordance with Chapter 4101:2-51 of the Ohio Administrative Code, and all regulations of Franklin County Public Health.

**TO BE FILLED IN BY APPLICANT**

Address \_\_\_\_\_ New \_\_\_\_\_ Remodel \_\_\_\_\_

Owner's Name and Address \_\_\_\_\_

Phone # \_\_\_\_\_

Does the sewer discharge into an individual sewage system or sanitary sewer? \_\_\_\_\_

How far distant from any dwelling, well or cistern is the sewage tank? \_\_\_\_\_

Of what materials is the draining system? ABS \_\_\_\_\_ PVC Plastic \_\_\_\_\_ Cast Iron \_\_\_\_\_ DWV Copper \_\_\_\_\_

	Qty.
Air Admittance Valve	
*Backflow Prevent	
Bath Tubs	
Bed Pan Washers	
Bidet	
Chemical Sinks	
Dental Cuspidors	
Dilution Sump	
Dish Washers	
Drinking Fountain	
Floor Drains	
Garage Catach Basin	

	Qty.
Garbage Disposal	
Hot Water Heater	
Interceptor	
Kitchen Sink	
Laundry Trays	
Lavatories	
Mop Sinks	
Outside Faucets	
Roof Drains	
Rough-in Openings for Future	
Sewage Ejectors	

	Qty.
Showers	
Sterilizers	
Sump Pump	
Trap Primer	
Urinal	
Wash Fountain	
Washing Machine	
Water Closets	
Water Lines	
Water Storage Tank	
Other	
<b>GRAND TOTAL</b>	

**HOT WATER REPLACEMENT FEE \$200.00** plus Administrative fee

Master Plumber or Home Owner \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Plumber Registration # \_\_\_\_\_

\*Indicate Name of Certified Backflow Tester \_\_\_\_\_

**Instructions**

This application must be properly filled out and returned to the Canal Winchester Building Department accompanied by fee calculated upon the following basis:

Application for permit & first fixture . . . . .	\$200
_____ Number of remaining fixtures X \$20.00 . . . . .	\$
10% Administrative Fee (Includes State fee) . . . . .	\$
Total Inspection fee . . . . .	\$
<b>Re-Inspection fee (based upon disapproval inspections and collected by Franklin County Public Health ONLY) . . . . .</b>	<b>\$100</b>

**MAKE CHECKS PAYABLE TO THE CITY OF CANAL WINCHESTER**

For any plumbing related questions please contact Franklin County Public Health at 614-525-3635