

City of Great Bend  
Building Inspections  
1217 Williams Street  
Great Bend, KS 67530  
(620) 793-4106

## Plumbing Permit Application



Application Date \_\_\_\_\_

2018 IBC/IRC  
2018 IFC  
2017 NEC  
2018 UMC  
2018 UPC

### Property Information

Street Address	City, State	Zip
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### Owner Information

First Name	Last Name	Phone	
Street Address	City	State	Zip

### Contractor Information

Name	Phone
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### Project Information

Project Description	Type of Work	Estimated Cost
<input type="checkbox"/> Single Family	<input type="checkbox"/> New	\$ _____
<input type="checkbox"/> Duplex	<input type="checkbox"/> Remodel	
<input type="checkbox"/> Multi Family	<input type="checkbox"/> Repair	
<input type="checkbox"/> Detached Garage		Estimated Completion Date
<input type="checkbox"/> Shed		_____
<input type="checkbox"/> Deck		
<input type="checkbox"/> Commercial		
<input type="checkbox"/> Mobile Home		
<input type="checkbox"/> Other		

Indicate the number of outlets being installed for each of the items below:

FIXTURES		GENERAL	
<input type="checkbox"/> Auto Washers	<input type="checkbox"/> Sump Pump	<input type="checkbox"/> Back Flow Preventer	<input type="checkbox"/> Water Service Line
<input type="checkbox"/> Dishwashers	<input type="checkbox"/> Tubs	<input type="checkbox"/> Building Sewer Line	<input type="checkbox"/> PE
<input type="checkbox"/> Drinking Fountains	<input type="checkbox"/> Water Closet	<input type="checkbox"/> Fire Sprinkler System	<input type="checkbox"/> Copper
<input type="checkbox"/> Floor Drains	<b>GAS OUTLETS</b>	<input type="checkbox"/> Gas Pressure Test	<input type="checkbox"/> Water Softener Install
<input type="checkbox"/> Garbage Disposal	<input type="checkbox"/> Cook Range	<input type="checkbox"/> Gas Service Line	
<input type="checkbox"/> Grease Trap	<input type="checkbox"/> Fire Place	<input type="checkbox"/> Septic Tank	<b>SEWER</b>
<input type="checkbox"/> Lavatory	<input type="checkbox"/> Furnace	<input type="checkbox"/> Sewer Line	<input type="checkbox"/> Benefit District
<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Gas Grill	<input type="checkbox"/> Water Distribution Line	<input type="checkbox"/> Sewer Hookup
<input type="checkbox"/> Sand Trap	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Water Heater Install	<input type="checkbox"/> Non-Benefit District
<input type="checkbox"/> Showers	<input type="checkbox"/> Space Heater		<input type="checkbox"/> Sewer Hookup
<input type="checkbox"/> Sinks	<input type="checkbox"/> Water Heater		

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent. I also certify that the information provided is correct and that I will comply with all zoning regulations, as well as all City, State and Federal requirements. A permit issued upon false statement of any fact, which is material to the issuance of a permit, shall void said permit. Permits and/or Certificates of Occupancy, when issued, DO NOT NULLIFY ANY DEED RESTRICTIONS OR EASEMENTS VALIDLY FILED OF RECORD. In addition, I agree to install appropriate erosion control measures in order to avoid dirt, sand and other material from accumulating within public street right-of-ways. I also agree that if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature	Date
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Office Use Only
Permit Fee \$ _____ Permit # _____ Permit Issue Date _____