

THE CITY OF PORTSMOUTH
PLUMBING & SEWER PERMIT APPLICATION
 DEPARTMENT OF PERMITS & INSPECTIONS

801 Crawford Street
 Portsmouth, VA 23704
 www.portsmouth.va.us/forms/forms.htm
 Tel. (757) 393-8531 FAX (757) 393-5108
 A PERMIT IS HEREBY REQUESTED TO INSTALL:
 Plumbing Sewer Connection

1. Address of Job: 5533 Greenbrook Dr., Portsmouth, VA 23703
2. Owner: John Vogt 3. Phone 757-477-1814
4. Plumbing Contractor Trade Name: All-Cor Plumbing
5. Plumbing Contractor's Address: 953 Ferryman Quay
- City: Chesapeake ZIP: 23323 7. State License 2705149684
 Class A No. _____
 Class B No. _____
 Class C No. _____
6. Plumbing Contractor's Phone Number: 470-300-8553

8. USE:

Residential

- One Family
 Two Family
 Multi-Family
 _____ no. of units
 Hotel, Motel
 Other

***Commercial**

- Assembly
 Office, Bank, _____ no. of units
 Elevators
 Educational
 Factory/Industrial
 High Hazard
 Mercantile, Stores _____ no. of units
 Institutional:
 Hospital
 Convalescent
 Day Nurseries
 Temporary _____
 OTHER _____

*(Site & Plumbing Plans to accompany application)

9. Indicate on the following list the number of plumbing fixtures, roof drains, sewer connections, etc. to be installed:

Bath Tub	A	Laundry Tray	G	Sink	M	Service Line Renewal	S
Dishwashing Machine	B	Lavatory	H	Storm Drain	N	Water Heater	T
Drinking Fountain	C	Roof Drains	I	Urinals	O	Backflow	U
Floor Drain	D	Sewer Connection	J	Washing Machine	P	Other	V
Garbage Grinder	E	Sewer Renewal	K	Water Closet	Q	Reinspection	W
Interceptor	F 1	Shower	L	Water Service Line	R		

10. Total number of Plumbing items to be installed: 1
11. Nature of work: tub/shower to shower conversion using same footprint and drain location. No structural work.

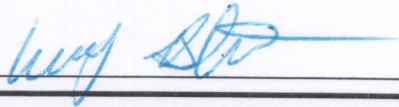
12. Valuation: \$ 14,000 15. Total Fee: \$ _____

All permits necessary for the completion of the work indicated will be obtained and paid for before any work is started. Failure to comply with applicable codes will result in the penalties set forth in Chapter 6, Portsmouth City Code. Any falsification, misrepresentation or misleading information **VOIDS** this application.

13. APPLICANT

Master Plumber

SIGNATURE



DATE: 10/18/19

OFFICE USE ONLY

Case No. _____ Application No. _____
 Job No. _____

