

**PUEBLO REGIONAL BUILDING AUTHORITY**

316 W. 15th Street  
Pueblo, Colorado 81003

ADDRESS OF JOB	<b>PLUMBING OR DOMESTIC APPL. PERMIT</b>	<b>2</b>
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WHEN SIGNED AND VALIDATED BY THE DEPARTMENT, THIS PERMIT AUTHORIZES THE WORK DESCRIBED BELOW. MATERIALS AND EQUIPMENT REQUIRED TO COMPLETE THIS WORK ARE SUBJECT TO THE APPLICABLE SALES & USE TAX. (INCLUDING SUBCONTRACTORS)

**CLASS OF WORK:** NEW  ADDITION  REPLACE  ALTERATION  REPAIR  MOVE  CONVERSION

**OWNER:**

NAME	ADDRESS	PHONE
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<b>CONTRACTOR</b>	LICENSE CLASS	LICENSE NUMBER
NAME (AS LICENSED)		

ADDRESS	CITY	ZIP	PHONE
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**USE OF BUILDING**

PLUMBING <input type="checkbox"/>			DOMESTIC APPLIANCES <input type="checkbox"/>		
DESCRIPTION OF WORK	NO. OF EACH	FEE	DESCRIPTION OF WORK	NO. OF EACH	FEE
Issuing Permit			Sewer Connection (CITY ONLY)		
Back Flow Prevention Device			Shower		
Bath Tub			Sink & Garbage Disposal		
Building Sewer Res. or Com'l			Solar System Res. or Com'l		
Drinking Fountain			Storm Sewer		
Fire Main			Swimming Pool Res. or Com'l		
Floor Drain or Floor Sink			Underground Piping		
Grease Trap			Urinal		
Hot Tub or Spa Res. or Com'l			Vegetable Sink		
Industrial Interceptor			Wash Basin		
Laundry Machine			Water Closet		
Lawn Sprinkler System Res. or Com'l			Water Service Line Res. or Com'l		
Mop Sink			Water Connected Appliances		
Roof Drain			Water Connections		
Sand Trap			Other		

**REMARKS**

**NOTES TO APPLICANT:**

**FOR INSPECTIONS CALL 543-0002**

FOR ALL WORK DONE UNDER THIS PERMIT THE APPLICANT ACCEPTS FULL RESPONSIBILITY FOR COMPLIANCE WITH UNIFORM BUILDING CODES AND ALL OTHER APPLICABLE ORDINANCES.

Required inspections **Shall** be requested one working day in advance. A final inspection **Shall** be made on all items of work before occupancy is permitted.

NO CERTIFICATE OF OCCUPANCY SHALL BE ISSUED UNTIL DEPARTMENT OF FINANCE HAS RELEASED THE BUILDING FROM SALES AND USE TAX OBLIGATIONS OF THE CITY OR COUNTY OF PUEBLO, AS APPLICABLE.

SIGNATURE OF APPLICANT: **X** \_\_\_\_\_

THIS FORM IS A PERMIT ONLY WHEN VALIDATED HERE

VALUATION OF WORK \$		↓	TOTAL FEE
PLAN FILED	T P		
DOUBLE FEE <input type="checkbox"/>	CHECK <input type="checkbox"/>	\$	REGIONAL BUILDING DEPARTMENT
	CASH <input type="checkbox"/>		
APPROVAL	DATE		

DATE	PERMIT NO.	RECEIPTS CLASS	AMOUNT