

Plumbing Permit Application

Building Department: 604-990-2480, building@dnv.org, fax: 604-984-9683

INSPECTIONS:				
<ul style="list-style-type: none"> Book online at www.dnv.org/inspection If you submit your request by 2:30pm Monday – Friday (excluding statutory holidays), you can schedule your inspection for the next business day 				
Location of Work			PLBG	
Address				
Occupancy Type	<input type="checkbox"/> Single Family	<input type="checkbox"/> Duplex/Townhouse	<input type="checkbox"/> Commercial	<input type="checkbox"/> Institutional
	<input type="checkbox"/> Single Family with Secondary Suite	<input type="checkbox"/> Multi-Family Apartment	<input type="checkbox"/> Industrial	<input type="checkbox"/> Government
Type of Work	<input type="checkbox"/> New Construction		<input type="checkbox"/> Alternation/Addition	<input type="checkbox"/> Replacement/Repair
Description of Work				
Building Permit Status				
Is this work related to a current Building Permit?	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
If yes, is the Building Permit issued?	<input type="checkbox"/> Yes		Building Permit Number BLDG _____	
Contractor Information				
Contractor				
Business Name			Business Licence Number	
Mailing Address			City	Postal Code
Email			Phone	Cell
<p>By signing or clicking the box below, I affirm that the information provided in this application for a plumbing permit is true and correct and agree to comply with the BC Plumbing Code and Regulations and the District's Construction Bylaw. I further agree to indemnify and save harmless the District of North Vancouver and it's employees against all claims, liabilities, judgements and costs arising from any work done pursuant to this permit.</p>				
Applicant's Signature				
I understand that checking this box constitutes a legal signature <input type="checkbox"/>			Date	
Homeowner Information				
Name				
Email			Phone	Cell

If you are the Homeowner doing the work, you must:

- Be the registered owner of the property and living in the home
- Provide schematic drawings with the application
- Provide signed Statutory Declaration form with application

Installation Details

Fixtures	Quantity	Services	Quantity or Length of Pipe
Acid Waste interceptor		Sanitary sewer and/or drain	(m)
Automatic washer		Storm sewer and/or drain	(m)
Backflow preventer/vacuum breaker		Water service	<input type="checkbox"/> Yes <input type="checkbox"/> No
Basin			
Bathtub			
Bidet		Other (Please specify)	
Dishwasher			
Drinking fountain		Other (Please specify)	
Grease interceptor			
Floor drain			
Interceptor – other		Re-piping of an existing building	
Laundry Tub		Equivalent Number of Fixtures	
Oil & grit interceptor			
Pool drain			
Roof drain			
Sanitary pump			
Storm pump			
Shower			
Sink			
Urinal			
Water closet			
Water tank			

Prior to requesting a final inspection, the following must be provided where applicable:

- Backflow preventer test certificate
- Completed *Building Code* Schedule 'C' from all registered professionals

The personal information collected on this form is done so pursuant to the *Community Charter* and/or the *Local Government Act* and in accordance with the *Freedom of Information and Protection of Privacy Act*. The personal information collected herein will be used only for the purpose of processing this application or request and for no other purpose unless its release is authorized by its owner, the information is part of a record series commonly available to the public, or is compelled by a Court or an agent duly authorized under another Act. Further information may be obtained by speaking with The District of North Vancouver's Manager of Administrative Services at 604-990-2207 or at 355 West Queens Road, North Vancouver.