

COMMUNITY DEVELOPMENT DEPARTMENT

Code Administration Division 129 North Second Street, 2nd Floor Yakima, Washington 98901

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Thursday, and the second	PLUMBI	NG PERM	IT APPLICATION Permit	t#		
Job Address:	Parcel Number:					
Project Description:					<u>-</u>	
Estimated cost of the work to be pe	rformed (mat	terials and lal	por): \$			
_						
Property Owner			Contractor			
Name:			Business Name:			
Address:			Address:			
City/State/Zip:			City/State/Zip:			
E-mail:			E-mail:			
Phone:			State Cont. Lic. #:	exp		
Alt. Phone:			Phone:			
ITEM	EXISTING	<u>NEW</u>		EXISTING	<u>NEW</u>	
	QUANTITY	QUANTITY	ITEM	QUANTITY	QUANTITY	
Atmospheric Breaker			Mop Sink			
Backflow Device (RPBA or DCVA) <2"			Pretreatment Interceptor			
Backflow Device (RPBA or DCVA) >2"			Repair/Alt. Drain/Vent Piping			
Bar Sink			Roof Drain			
Bathtub			Sewage Pump			
Clothes Washer			Sewer Repair/Replacement			
Dishwasher			Shower			
Drinking Fountain			Sink			
Floor Drain			Supplemental Permits			
Hose Bib			Urinal			
Kitchen Sink			Water Closet - Tank Type			
Kitchen Sink 3 Compartment			Water Closet – Flushometer Type			
Laundry Tray			Water Heater			
Lavatory (Basin)			Water Piping/Service			
Miscellaneous:			Sampling Port			
Declaration hereby certify that (please select one):						
☐ I am a CONTRACTOR or SPECIALTY C am legally qualified to perform the work s			ed and properly licensed as defined under R	RCW 18.27.010 and	l 18.27.110 and	
			be done by the property owner or a proper qualified to perform the work sought by this		ctor or specialty	
	own work or use	all registered a	vs, per RCW 18.27.090, and will abide by a and licensed contractors and/or specialized			
information contained herein is true and	correct. I under	stand that the g	ashington that I have read and examined to tranting of a permit does not authorize me it on or performance of construction sought ur	n any way to violat		
Signature			Print Name	Dat	e	