

**PLUMBING AND SOLAR HEATING PERMIT APPLICATION
TOWNSHIP OF MIDDLETOWN
LANGHORNE, PENNSYLVANIA
COUNTY OF BUCKS**

FEDERAL TAX ID# EIN _____
 *Required for all Non-Residential Permits
 TAX MAP NO. 22 _____

Permit # _____
 Date Issued _____
 Block _____ Lot # _____
 Subdivision _____

ADDRESS OF CONSTRUCTION SITE _____

Tenant	NAME _____
	STREET _____
	CITY _____ STATE ____ ZIP _____
	DAYTIME PHONE # _____
	EMAIL _____

Property Owner	NAME _____
	STREET _____
	CITY _____ STATE ____ ZIP _____
	DAYTIME PHONE # _____
	EMAIL _____

Contractor	NAME _____
	STREET _____
	CITY _____ STATE ____ ZIP _____
	DAYTIME PHONE # _____
	EMAIL _____
	PA REGISTRATION # _____

NO.	FIXTURE	FEE	NO.	FIXTURE	FEE		FEE
_____	Each Fixture	\$ _____	_____	Solar Heating	\$ _____	Column One	\$ _____
_____	Outside Hose Bibb	\$ _____	_____	Water Tie-In	\$ _____	Column Two	\$ _____
_____	Domestic Water Heater Or Coil	\$ _____	_____	Each Circulator	\$ _____	State	\$ _____
_____	Boiler & Potable Water Tie-In	\$ _____	_____	Ejector Pump	\$ _____	Total Permit Fee	\$ _____
_____	Fire Sprinkler Potable Water Tie- In	\$ _____	_____	Sump Pump	\$ _____		
_____	Sewer Service (Per Occupancy)	\$ _____	_____	Separators	\$ _____		
_____	Water Service (Per Occupancy)	\$ _____	_____	Floor Drains	\$ _____		
_____	Lawn Sprinkler	\$ _____	_____	Grease Trap	\$ _____		
_____	Backflow Preventer	\$ _____	_____	Other	\$ _____		
_____		\$ _____	_____	Other	\$ _____		
_____		\$ _____	_____	Other	\$ _____		
_____		\$ _____	_____	Other	\$ _____		
Total Column One		\$ _____	Total Column Two		\$ _____		

I hereby acknowledge that I have read this application and state the above is correct and agree to comply with all Township ordinances and State Laws regarding construction.

THE ABOVE APPLICATION HAS BEEN APPROVED

BY _____

OWNER OR APPLICANT _____ DATE _____

DATE _____

TOTAL COST OF JOB:

NOTE: TWO (2) ISOMETRIC DRAWINGS (piping) ARE REQUIRED FOR ALL WORK OTHER THAN REPLACEMENTS.

DESCRIPTION OF PROPOSED WORK: