



**APPLICATION FOR COMMERCIAL SINGLE FIXTURE PERMIT**

The undersigned hereby applies for a permit to do plumbing and for the inspections at the following location in accordance with the Ohio Plumbing Code and the Logan County General Health District Regulation 46.

**FIXTURE / APPLIANCE BEING INSTALLED** \_\_\_\_\_

Job Location: \_\_\_\_\_ Township \_\_\_\_\_  
(street address) (town)

Owner's Name \_\_\_\_\_

Owner's Address \_\_\_\_\_ Phone # \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_

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Name of Submitter \_\_\_\_\_ Phone \_\_\_\_\_

Submitter's Address \_\_\_\_\_  
(Street address) (Town) (State) (Zip)

**I hereby certify that I am the Owner/Agent for the owner and all information contained in this application is true, accurate, and complete to the best of my knowledge. All official correspondence in connection with this application should be sent to my attention at the address shown above.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
(Owner/Agent for Owner)

**PERMIT APPLICATION ..... \$50.00**

Office Use Only:

**Approved by:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Permit #** \_\_\_\_\_ **Date Paid** \_\_\_\_\_ **Receipt** \_\_\_\_\_ **Clerk** \_\_\_\_\_

**Penalty Fee** \_\_\_\_\_ **Date Paid** \_\_\_\_\_ **Receipt** \_\_\_\_\_ **Clerk** \_\_\_\_\_

**Re-inspection fee** \_\_\_\_\_ **Date Paid** \_\_\_\_\_ **Receipt** \_\_\_\_\_ **Clerk** \_\_\_\_\_