



Village of Chagrin Falls – Building Department
RESIDENTIAL PLUMBING PERMIT APPLICATION

Village Hall 21 W. Washington St. Chagrin Falls, OH 44022
 Phone # 440-247-5050 – Fax # 440-247-2082

Building Inspector: Harry Edwards Email: Harry@chagrin-falls.org Direct: 440-247-3156
Building Administrative Assistant: Katie Knauff Email: Katie.Knauff@chagrin-falls.org

| |
|--------------------|
| Permit # _____ |
| Approved by: _____ |
| Total Due: _____ |

General Requirements:

- 1) Plumbing or Gas Line Permit fee for additions/alterations = **\$50**; New Dwelling fee = \$100 (see below).
- 2) For **NEW** construction or **REMODELS** to bathroom/kitchen/home where a minor building permit is required, please use combination residential building permit application form. The general contractor is to pull all permits for job for whole job.
- 3) This permit application is for when **plumbing work only** is taking place.
- 4) Contractors must be registered with the Village of Chagrin Falls **PRIOR TO START DATE**.
- 5) The RCO systems description form, listed below, may be submitted in lieu of fully detailed plans for the following systems: Fuel Gas & Plumbing systems.

ALL INFORMATION IN THIS SECTION IS REQUIRED. ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED.
SEE ABOVE FOR ADDITIONALLY REQUIRED INFORMATION.

| | | |
|-----------------------------------|--|--------------------------|
| Address of Jobsite: _____ | Est. Cost of Construction: \$ _____ | Start Date: _____ |
| Description of Work: _____ | | |
| _____ | | |

PROPERTY OWNER'S INFORMATION:

- Name: _____
- Address: _____
- Email: _____
- Phone #: _____

CONTRACTOR'S INFORMATION:

- Name: _____
- Address: _____
- Email: _____
- Phone #: _____

APPLICANTS'S INFORMATION: (If applicant is the property owner or contractor please indicate)

- Name: _____
- Address: _____
- Email: _____
- Phone #: _____

Residential Code of Ohio (RCO) Systems Description Form – Plumbing & Fuel Gas System Descriptions

| ITEM | No. | ITEM | No. | ITEM | No. |
|--|-------------------|--------------------------------------|--------------------------------------|--|---------------------------------|
| Water Closet | | Laundry Tub | | Pressure Reducing Valve | |
| Lavatory Sink | | Floor Sink | | Garbage Disposal | |
| Hot Tub | | Sump Pump | | Clothes Washer | |
| Kitchen Sink | | Floor Drain | | Dishwasher | |
| Bathtubs/Shower | | Hot Water Heater | | Backflow Device | |
| Water Heater: | Location: | <input type="checkbox"/> Basement | <input type="checkbox"/> Garage | <input type="checkbox"/> Attic | <input type="checkbox"/> Other |
| | Fuel Type: | <input type="checkbox"/> Natural Gas | <input type="checkbox"/> Electric | <input type="checkbox"/> Other | |
| | Capacity | BTU: | Gallons: | <input type="checkbox"/> Tankless | |
| Water Service: | Type: | <input type="checkbox"/> Copper | <input type="checkbox"/> PVC/Plastic | <input type="checkbox"/> Other | |
| | Size: | <input type="checkbox"/> 3/4" | <input type="checkbox"/> 1" | <input type="checkbox"/> 1-1/4" | <input type="checkbox"/> 1-1/2" |
| <u>Number of Fuel Gas Outlets</u> | | <u>Size of Fuel Gas Main</u> | | <u>Piping Materials</u> | |
| | | | | <input type="checkbox"/> Steel Pipe Sch. 40 <input type="checkbox"/> CSST <input type="checkbox"/> Other _____ | |

Signature of Applicant

Date

Village of Chagrin Falls – Building Department
PLUMBING or GAS LINE PERMIT APPLICATION

Village Hall 21 W. Washington St. Chagrin Falls, OH 44022

Phone # 440-247-5050 – Fax # 440-247-2082

Building Inspector: Harry Edwards Email: Harry@chagrin-falls.org Direct: 440-247-3156

Building Administrative Assistant: Katie Knauff Email: Katie.Knauff@chagrin-falls.org

