

# SPRINGETTSBURY TOWNSHIP APPLICATION FOR PLUMBING PERMIT

1501 Mt. Zion Rd, York, PA 17402

Phone: 717.757.3521 Fax: 717.757.7856 [www.springettsbury.com](http://www.springettsbury.com)

Application for Plumbing Permit to be applied for by Springettsbury Twp. licensed Master Plumber

Property Owner:  
\_\_\_\_\_

Plumber: \_\_\_\_\_

Company: \_\_\_\_\_

Property /Project Address:  
\_\_\_\_\_  
\_\_\_\_\_

Springettsbury Township Master License # \_\_\_\_\_

Phone # \_\_\_\_\_

E-mail: \_\_\_\_\_

[CIRCLE ONE OF EACH]

Type of Work: Repair          Renovation          New Construction

Type of Occupancy: Residential          Commercial

Sewer System: On-Site          Public Sewer

Description of Proposed Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Cost of Plumbing Work excluding HVAC: \$ \_\_\_\_\_

The undersigned hereby makes application for a plumbing permit in Springettsbury Township, York County, Pennsylvania and agrees to comply with all applicable statutes, ordinances, rules, and regulations relating thereto in Springettsbury Township. This application shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the code official shall have the authority to grant one or more extensions of time for additional periods not exceeding 180 days each. The extension shall be requested in writing and justifiable cause demonstrated. Permit Fees that have been paid are forfeited and will not be refunded under any circumstances.

\_\_\_\_\_  
Licensed Master Plumber Signature

\_\_\_\_\_  
Date

