

# CITY OF SALISBURY

**George Wilkerson**  
 Plumbing Inspector  
 410-548-3130

Department of Infrastructure & Development  
 125 N. Division St., Rm#202  
 Salisbury, Maryland 21801  
 www.salisbury.md

*Member:*  
 ICC  
 NFPA  
 MBOA

## PLUMBING PERMIT APPLICATION

<b>Date:</b>	<b>Permit #</b>
<b>Location:</b>	<b>Describe Work:</b>
<b>Owner's Name:</b>	<b>Plumber's Name:</b> LIC. #
<b>Address:</b>	<b>Address:</b>
City: State: Zip:	City: State: Zip:
<b>Check Two:</b>	<b>Plumber's Ph#:</b>
<b>Water Service:</b> <input type="checkbox"/> New <input type="checkbox"/> Existing	<b>Foreman's Ph#</b>
<b>Sewer Service:</b> <input type="checkbox"/> New <input type="checkbox"/> Existing	<b>Email:</b>
<b>Building Use:</b> <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Storage	

Qty	ITEM	FEE	TOTAL
	Water Closet	\$10	
	Bath Tub	\$10	
	Shower	\$10	
	Wash Basin Lavatory	\$10	
	Kitchen Sink	\$10	
	Drinking Fountain	\$10	
	Laundry Tray	\$10	
	Mop Sink	\$10	
	Automatic Washer	\$10	
	Water Heater	\$10	
	Urinal	\$10	
	Automatic Dish Washer	\$10	
	2/3 Compartment Sink	\$10	
	Fixtures Not Listed	\$10	
	Outside Faucet	\$10	
	Water Distributing Pipe	\$15	
	Building Drainage	\$15	
	Water Service Pipe	\$30	
	Building Sewer	\$30	
	Interceptor-Grease-Oil-Sand	\$75	
	Non Testable Back Flow Device	\$10	
	Testable Backflow Assembly	\$100	
	Sewage Pump	\$20	
	Backwater Valve	\$20	
	Fire Water Service Pipe *	\$50 *	
<b>PERMIT BASE FEE</b>			<b>\$30</b>
<b>TOTAL FEES DUE</b>		<b>\$ _____</b>	

**PERMIT REQUIREMENTS**

I hereby understand that whenever, the opinion of the Building Official, drawing and specifications are required, I shall furnish such drawings and specifications.

I further understand that it is my responsibility to stand for all required inspections & to provide reasonable advance notice to the Department of Building, Permitting & Inspections when plumbing work is ready for inspection.

I acknowledge that I have read this application and state the above is correct. Furthermore, I agree to comply with all city ordinances and state laws regulating plumbing work.

I certify that I am a registered and licensed master plumber as required by the City of Salisbury and the State of Maryland.

\_\_\_\_\_  
 Signature of Master Plumber      Date

**OFFICE USE ONLY**

**Date Paid:** \_\_\_\_\_ **Cash/Check:** \_\_\_\_\_

**Approved for Code Compliance**

\_\_\_\_\_  
 Issued Date:

**Note: A Certificate of Insurance must be provided**

\* Installation of a fire water service pipe will require additional inspections by the City Fire Marshal and additional fees may apply. Call the Office of the Fire Marshal at 410-548-3120 for additional information.