

**TOWN OF TRUMBULL  
APPLICATION FOR PLUMBING PERMIT**



Plumbing Permit No: \_\_\_\_\_

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

Building Permit No: \_\_\_\_\_

Licensed Contractor: \_\_\_\_\_ CT License No: \_\_\_\_\_

Contractor Address: \_\_\_\_\_ Phone No: ( ) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Location of Job: \_\_\_\_\_ Property Owner: \_\_\_\_\_

Kind of Building: Frame \_\_\_\_\_ Masonry \_\_\_\_\_ New \_\_\_\_\_ Old \_\_\_\_\_ Addition \_\_\_\_\_

Water Test: \_\_\_\_\_ Finished Test: \_\_\_\_\_

**FIXTURES**

Floor/ Location	No. of Bathrooms	Toilets	Sinks	Bathtubs	Stall Showers	Washer	Whirlpool
Basement							
First							
Second							
Third							
Total							

ADDITIONAL COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I HEREBY MAKE APPLICATION FOR A PERMIT TO DO PLUMBING WORK ACCORDING TO THE ABOVE DETAILED STATEMENT. ALL WORK SHALL BE DONE IN ACCORDANCE WITH THE CONNECTICUT STATE BUILDING CODE IN EFFECT AT THE TIME OF APPLICATION AND WITH ANY AND ALL REGULATIONS OF THE TOWN OF TRUMBULL.

Signature of Master: \_\_\_\_\_ Print Name: \_\_\_\_\_

Estimated Value of Work: \_\_\_\_\_

Fee: \_\_\_\_\_