



# CITY OF SURREY

Planning & Development - Building Division (Plumbing Section)  
13450 - 104<sup>th</sup> Avenue, Surrey, B.C. V3T 1V8  
Phone (604) 591-4245 Fax (604) 591-2680 Website: [www.surrey.ca](http://www.surrey.ca)

OFFICE USE ONLY:

Plumbing Permit #:

## PLUMBING PERMIT APPLICATION

INSTALLER DETAILS		Select type of contractor: (pick one only)	PROJECT DETAILS	
Name/Company		<input type="checkbox"/> Plumbing Contractor <input type="checkbox"/> Building Contractor <input type="checkbox"/> Fire Sprinkler Contractor <input type="checkbox"/> Heating Contractor <input type="checkbox"/> Geothermal Heating Contractor <input type="checkbox"/> Pool Contractor <input type="checkbox"/> On Site Services Contractor <input type="checkbox"/> Homeowner	Address:	
Current Surrey Business License #:			Building #:	Unit #:
Address:			Lot #:	Building Permit #:
City:	Postal Code:		Owner or Agent Name:	
Phone No.:	Fax No.:		*Sprinkler Fitter TQ #	
Name & Plumbing Certification TQ #:		*Sprinkler Fitter Name:		

All inside plumbing work must be done by a plumber holding a Trades Qualification and a current Surrey Business License issued by the Bylaw Enforcement & Licensing Section in compliance with the B.C. Plumbing Code except in the case of a single family dwelling home owner, (isometric drawing required).

1. Select the applicable permit type and sub-type (type of building):

<b>a) Residential Single Family</b>	<b>b) Multi-Family/Commercial/Industrial</b>	<b>c) On Site Servicing</b>
<input type="radio"/> Single Family <input type="radio"/> Single Family w/Secondary Suite <input type="radio"/> Duplex Dwelling <input type="radio"/> Garage/Coach House <input type="radio"/> Detached Garage <input type="radio"/> Other	<input type="radio"/> Multi-Family <input type="radio"/> Commercial <input type="radio"/> Industrial <input type="radio"/> Institutional <input type="radio"/> Row house	<input type="radio"/> Single Family <input type="radio"/> Multi-Family <input type="radio"/> Commercial <input type="radio"/> Industrial <input type="radio"/> Institutional

2. Select the applicable Work Proposed option:

<input type="radio"/> New <input type="radio"/> Existing <input type="radio"/> Renovations <input type="radio"/> Alterations <input type="radio"/> Transfer of Permit <input type="radio"/> Addition <input type="radio"/> Home Owner	<input type="radio"/> Fire Sprinklers <input type="radio"/> Re-Piping # of units _____ (BP will be required) <input type="radio"/> Swimming Pool <input type="radio"/> Hydronic Heating - Check appropriate fields and attach signed Certification As To Hot Water Heating letter Boiler size input (BTU's): _____	<b>SLAB:</b> <input type="radio"/> Radiant <input type="radio"/> Baseboard	<b>CRAWLSPACE:</b> <input type="radio"/> Radiant <input type="radio"/> Baseboard	<b>UPPER FLOORS:</b> <input type="radio"/> Radiant <input type="radio"/> Baseboard
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4. Enter the # required for each applicable Info Field:

FIRE: _____ Fire Hose Outlets	_____ Fire Hydrants	PIPING: _____ Fire Water Service Line (ft)	_____ Water Service Line (ft)
_____ Fire Sprinkler Heads, New	_____ Fire Stand Pipes	_____ Sanitary Sewer Line (ft)	
_____ Fire Sprinkler Heads, Relocated	_____ Siamese Connections	_____ Storm Sewer Line (ft)	

5. Enter the # required for each applicable Fixture:

_____ Auto Washer	_____ Hot Water Tank	_____ Shower	_____ Sump and Pump, Sanitary
_____ Backwash	_____ Hub Drain	_____ Sink, Bar	_____ Sump and Pump, Storm
_____ Bath Tub	_____ Icemaker	_____ Sink, Island	_____ Urinal
_____ Canopy Drain	_____ Interceptor, Grease	_____ Sink, Kitchen	_____ Wash Basin
_____ Catch Basin	_____ Interceptor, Oil	_____ Sink, Mop	_____ Wash Tub
_____ Deck Drain	_____ Lawn Basin	_____ Sink, Secondary Kitchen	_____ Water Closet
_____ Dishwasher	_____ Manhole	_____ Sink, Service	_____ Water Heater, Indirect
_____ Drinking Fountain	_____ Other	_____ Sink, Shampoo	_____ Water Meter
_____ Floor Drain	_____ Roof Drain	_____ Sump	

*\*Please note: there is a separate backflow preventer application form.*

6. Please provide any other details that will accurately determine the work this Plumbing Permit is to cover:

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OFFICE USE ONLY:		<b>ALTERATIONS:</b>	\$
		Transfer of Permit:	\$
		<b>SPECIAL INSPECTION</b> - see Plumbing By-law for Details	\$
Total Number of Fixtures:		Plumbing Permit Fees:	\$
Receipt Number:		Heating Permit Fees:	\$
Initials:		Total Permit Fees:	\$

I hereby agree that all work performed under this permit shall be done in accordance with the Plumbing "Regulations and By-laws" of the City of Surrey.

Signed this: \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature: \_\_\_\_\_  
(Applicant)