

**Bartholomew County/City of Columbus, Indiana**  
**PLUMBING & SPRINKLER**  
**PERMIT APPLICATION**

The Department of Technical Code Enforcement  
440 Third Street, Suite 302  
Columbus, Indiana 47201

Phone: (812) 379-1535  
FAX: (812) 379-1765

**INSTRUCTIONS:**

1) Print all information in INK. 2) Complete ALL information unless instructions indicate otherwise. 3) Place a checkmark or an X in the box corresponding to your response. 4) Questions? Call the Department of Technical Code Enforcement.

**1. LOCATION OF CONSTRUCTION ACTIVITY:**

**Address:** \_\_\_\_\_  
Number N-S-E-W Street Name Apt. #/Lot #

**2. OWNER OF PREMISES:**

**Name:** \_\_\_\_\_  
Last First M.I.

**Address:** \_\_\_\_\_  
Number N-S-E-W Street Name Apt. #/Lot #

City State Zip Code

**Telephone:** \_\_\_\_\_  
Area Code Number

**3. USE OF STRUCTURE:**

- Residential
- Commercial
- Multi-Family
- Other, Specify \_\_\_\_\_

**4. TYPE OF STRUCTURE:**

- New Structure
- Existing Structure
- Addition
- Other, Specify \_\_\_\_\_

**5. TYPE OF PLUMBING WORK:**

- Sprinkler System
- Installation
- Replacement
- Repair
- Alteration
- Remodel
- Addition
- Replace Hot Water Heater (If not identical unit)
- Other, Specify \_\_\_\_\_

**6. NUMBER OF SPRINKLER HEADS:**

# \_\_\_\_\_

**7. ESTIMATED COST OF PLUMBING WORK:**

\$ \_\_\_\_\_

**8. WILL ANY ELECTRICAL WORK BE PERFORMED?**

- YES (See Permit Clerk)
- NO

**9. STRUCTURAL BUILDING PERMIT NUMBER:**

# \_\_\_\_\_

**10. CONTRACTOR RESPONSIBLE FOR PERMIT:**

**Name:** \_\_\_\_\_  
Last First M.I.

**Contact:** \_\_\_\_\_  
Last First M.I.

**Address:** \_\_\_\_\_  
Number Street City State

**Telephone:** \_\_\_\_\_  
Area Code Number

A) State Plumbing License # \_\_\_\_\_

B) If you are obtaining this permit for a corporation, partnership or individual listed with the Dept. of Technical Code Enforcement, provide the following information:

**Name:** \_\_\_\_\_  
Last First M.I.

Contractor ID # \_\_\_\_\_

I hereby certify that I have the authority to make the foregoing application, that all accompanying documents are accurate and correct and that all plumbing methods will comply with all of the ordinances currently adopted by the State of Indiana, Bartholomew County and/or the City of Columbus, IN.

Contractor Signature: \_\_\_\_\_

Owner/Agent Signature: \_\_\_\_\_

Application Release Date: \_\_\_\_\_ State Release # \_\_\_\_\_ Permit # \_\_\_\_\_

Fee Amount: \$ \_\_\_\_\_ Initials: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Township: \_\_\_\_\_ Map & Parcel # \_\_\_\_\_

Zoning: \_\_\_\_\_ Flood Hazard Area:  YES  NO