



CITY OF COVINGTON
 Community Development Department
 16720 SE 271st Street • Suite 100 • Covington, WA 98042
 Phone: (253) 480-2400 • Fax: (253) 480-2401
 www.covingtonwa.gov

PLUMBING PERMIT APPLICATION

PROJECT ADDRESS: _____
 PARCEL NUMBER: _____
 SUBDIVISION NAME: _____ LOT# _____

FOR STAFF USE ONLY

Permit Number: _____
 Application Date: _____

PROJECT DESCRIPTION: _____ VALUATION: \$ _____

Type of Work: New Addition Alteration Repair Other: _____

Apply online for simple residential permits:
permits.covingtonwa.gov/citizen

Contact Permit Services for fee calculations:
permitservices@covingtonwa.gov

CONTRACTOR Applicant

Company: _____
 Contact Name: _____
 Address: _____
 City/State/Zip: _____
 Phone: _____ Fax: _____
 E-mail: _____
 State Contractor's License #: _____
 UBI #: _____

PROPERTY OWNER Applicant

Name: _____
 Address: _____
 City/State/Zip: _____
 Phone: _____ Fax: _____
 E-mail: _____

TENANT Applicant

Company: _____
 Contact Name: _____
 Address: _____
 City/State/Zip: _____
 Phone: _____ Fax: _____
 E-mail: _____

PLUMBING UNITS	NO.
Bathtub	
Clothes washer	
Dishwasher	
Drinking fountain	
Floor drain	
Grease trap	
Hose bib	
Kitchen sink	
Laundry tub/tray	
Lavatory (bathroom sink)	
Shower	
Toilet/water closet	
Urinal	
SUBTOTAL OF FIXTURES	
Sewer	
Cesspool	
Private Sewage	
Water Heater/Vent	
Gas Piping Outlets	
Waste Interceptor	
Install/Alter Drainage	
Repair/Alter Drainage	
Lawn Sprinkler	
Vacuum Breakers	
Backflow, up to 2 inches	
Backflow, over 2 inches	
Graywater system	
Reclaimed Water Testing	
Cross Connection Testing	
Medical Gas Piping	
Other: _____ (Electric water heaters, etc.)	
TOTAL PLUMBING UNITS	

I **acknowledge** that an application for a permit for any proposed work that has not resulted in the issuance of a permit within 180 days of the date of filing shall be deemed to have been abandoned.

I **certify** that as a contractor I am currently registered and properly licensed as defined in RCW 18.27, or as a property owner, I am exempt from the requirements of the contractor registration and will do all my own work or use properly licensed subcontractors in connection with the work to be performed under this permit. I **certify** that I have read and examined this application and know the same to be true and correct, and that if any of the information provided is incorrect, the permit or approval may be revoked.

Applicant's Signature **Date**