



**Public Health**  
Prevent. Promote. Protect.

# *Board of Health Sidney-Shelby County*

202 W. Poplar Street, Sidney, OH 45365

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## **PLUMBING PERMIT APPLICATION**

Anyone doing plumbing work in Shelby County is required to apply for a Plumbing Permit with the Shelby County Health Department.

### **COMMERCIAL REQUIREMENTS:**

- Commercial plumbing must submit isometric drawing along with a complete, signed application.
- Plans must be approved by inspector before permit is issued.
- Plumbing Department has 30 days to review drawings.
- Commercial Registered Plumbing Contractor must meet with plumbing inspector 8 - 9am or by appt.
- Commercial Plumbing Contractor must have Ohio State License.

*If a food service is involved, the Environmental Health Department must receive a set of drawings and the plans must be approved by a Food Service Sanitarian before a plumbing permit will be issued.*

### **RESIDENTIAL –WATER SOFTENER & WATER HEATER REQUIREMENTS:**

- Registered Shelby County Plumber submits completed form.
- Permit applications may be faxed with credit card information to 937-573-3502.

### **HOMEOWNER REQUIREMENTS:**

- Homeowner must be doing the plumbing.
- Submit Isometric drawing and meet with Plumbing Inspector 8 - 9am or by appt.
- Must live in the house for 1 year after final inspection. Must sign Owners Performance paperwork and be notarized.
- Landlord/Owner of rental property MAY NOT complete plumbing work.

**NO PERMITS WILL BE ISSUED WHEN CANCELLATION  
NOTICE OF INSURANCE IS RECEIVED**



Sidney-Shelby County Health Department  
 202 W. Poplar Street, Sidney, Ohio 45365  
[www.shelbycountyhealthdept.org](http://www.shelbycountyhealthdept.org)  
 Phone 937-498-7249 Fax 937-498-7013

Permit No. _____
Date Issued: _____
Plans Approved: _____
Receipt # _____
Date Paid: _____

## PLUMBING PERMIT APPLICATION

PRINT

Owner \_\_\_\_\_

Owner Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Plumbing Installer: \_\_\_\_\_

State License # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

State license number required for all Commercial plumbing

Location: New  Existing  Lot # \_\_\_\_\_  
 Residential  Commercial

Location Address \_\_\_\_\_

City \_\_\_\_\_ Township \_\_\_\_\_

Location on a septic system or well? Yes  No

The undersigned hereby applies for a permit to do plumbing conforming to and for the inspection thereof as provided by the Ohio Plumbing codes and Miami County Public Health Regulations.

Applicant \_\_\_\_\_

**NOTE: PLANS MUST BE APPROVED AND PERMITS SECURED BEFORE STARTING ANY WORK.**

- \*No final inspection of plumbing will be done until the required sewage system has been installed and approved.
- \*For inspection, call 937-573-3504 before 3:30 pm the day before. \*\*\*MUST HAVE PERMIT NUMBER\*\*\*
- \*For time of inspection, call the day of between 8-9 am.
- \*Commercial plan review MUST meet with a plumbing inspector before the application can be processed.
- \*Backflow inspection fee of \$25 to be paid with completed backflow inspection report.

Approved by: \_\_\_\_\_

**PERMITS ARE VALID FOR ONE YEAR FROM DATE OF ISSUE**

To charge your permit fees, complete the following: (\$2.50 convenience fee will be applied)

Name \_\_\_\_\_ Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ Phone # \_\_\_\_\_ 3-digit code \_\_\_\_\_

<b>FIXTURES \$17</b>	<b>B</b>	<b>1</b>	<b>2</b>	<b>3</b>
Water Closet				
Bath Tub				
Lavatories				
Shower				
Sink				
Garbage Disposal				
Dishwasher				
Laundry Tray				
Automatic Washer				
Floor Drain				
Ejector Pit				
Back Water Valve				
Air Admittance Valve				
Water Heater				
Water Softener				
Grease Trap				
Oil Interceptor				
Urinal				
Drinking Fountain				
Roof Drains				
Sump Pump				
<b>REPLACEMENTS \$30</b>				
Water Heater				
Water Softener				

<b>INSPECTION FEES</b>	
Basic Permit	\$45.00
Fixture or Trap	@\$17.00
Plan Review Residential	\$45.00
Plan Review - Commercial	.0125 per sq. foot / Min \$25.00
Re-inspection Fee	\$50.00
Special Inspection Fee	\$125.00
<b>Backflow Recertification</b>	<b>\$25.00</b>
<b>NO PAYMENT DUE UNTIL AFTER PLAN REVIEW IS FINALED</b>	
<b>TOTAL DUE</b>	