

PLUMBING PERMIT

Permit Application

Location of Work

Address _____
Number N-S-E-W Street Name Apt. #

Owner of Property

Name _____
Address _____
Number N-S-E-W Street Name Apt #

City _____ State _____ Zip Code _____
Phone (____) _____

Contractor Name

Name

Address _____
Number N-S-E-W Street Name Apt. #
Phone (____) _____

Contractor License Numbers

Indianapolis _____
Beech Grove

Fee Schedule:

Install Plumbing in new Structure	
____ Minimum Fee	\$75.00
____ 1 or 2 Family Structure	\$75.00
____ General Rate, 20% of fee for building permit	
____ Plan Review Fee	\$50.00
____ Inspection Fee	\$50.00
Alteration, addition or replacement of plumbing more than 50% of system.	
____ Minimum Fee	\$50.00
____ 1 or 2 Family Structure	\$50.00
____ Other than 1 or 2 family structure	\$50.00
____ General Rate, \$6/\$1,000 value	
____ Plan Review Fee	\$50.00
____ Inspection Fee	\$50.00
____ Initial Connection Fee	\$75.00

CITY OF BEECH GROVE
806 MAIN STREET
317 788-4977
317 788-4976

Permit # _____
Date

Processed by _____
Fee