



THE CORPORATION OF THE DISTRICT OF OAK BAY  
 MUNICIPAL HALL – 2167 OAK BAY AVENUE – VICTORIA B.C. V8R 1G2  
 PHONE (250) 598-3311 FAX (250) 598-9108 WEBSITE: [www.oakbaybc.org](http://www.oakbaybc.org)

## PLUMBING PERMIT APPLICATION

Permit # \_\_\_\_\_

Part of BP# \_\_\_\_\_

Address of property: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Contractor's Name \_\_\_\_\_

Contractor's Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Business License Yes \_\_\_\_\_ No \_\_\_\_\_ Telephone No. \_\_\_\_\_

### Work to be carried out:

Fixture Name	New	Replacement	Fixture Name	New	Replacement
Bar Sink			Hot Water Tank		
Bath Tub			Kitchen Sink		
Bidet			Laundry Tub		
Clothes Washer			Lavatory Basin		
Dish Washer			Shower		
Floor Drain			Toilet		

Total Number of Fixtures	_____	@ \$ 10.00 per fixture	\$ _____
Backflow Assembly	_____	@ \$ 20.00 each	\$ _____
Irrigation System	_____	@ \$ 25.00 each	\$ _____
Sanitary Laterals	_____	@ \$ 25.00 each	\$ _____
Storm Laterals	_____	@ \$ 25.00 each	\$ _____
Sump, Catch Basin, Interceptors & Manholes	_____	@ \$ 25.00 each	\$ _____
Roof Drains/Roof Leaders	_____	@ \$ 10.00 each	\$ _____
Fire Protection Standpipes [1-4 Hoses]	_____	@ \$ 20.00 each	\$ _____
Additional Hose Connection	_____	@ \$ 10.00 each	\$ _____
Sprinkler Systems [1-10 Heads]	_____	@ \$ 50.00 each	\$ _____
Additional Heads	_____	@ \$ 5.00 each	\$ _____
Water Line – ¾ inch <b>or</b> 1 inch	_____	@ \$ 20.00 each	\$ _____
Dual Check Valve Assembly	_____	@ \$175.00 each	\$ _____
Meter – ¾ inch <b>or</b> 1 inch	_____	@ \$150.00 each	\$ _____
Special Equipment not Listed [Other]	_____	@ \$ 20.00 each	\$ _____
Repair or Alteration Work [No Fixtures]	_____	@ \$ 30.00 each	\$ _____
		Basic Fee	\$ 15.00

*I hereby apply for a permit to install the plumbing work noted and I agree to comply with the requirements of the Plumbing By-law and other Regulations relating to the installation, inspection and testing of this work.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Plumber **or** Owner