Town of Hollywood

PLUMBING

PERMIT APPLICATION

Location of Proposed Work:		
Owner of Premises:	Name:	
	Address:	
	Phone:	
Contractor:	Name:	
	Address:	
	Phone:	
Describe Scope of Job:		-
		-
		-
Job Valuation: \$		
Number of Bathrooms (Resid	lential Plumbing):	
Number of Fixtures (Comme	rcial Plumbing):	
S	PECIAL ATTENTION TO CONTRACTORS:	
PLUMBING: (1) St	ate Master Plumbing Certification; Applicant shall haty License Required	ave wallet ID Card
COST OF PERMIT: \$		Jse Only