Papillion Building Department
122 East Third Street
Papillion NE 68046
Phone: 402-597-2072
Fax: 402-597-2074
www.papillion.org

Business Hours 8 am – 5 pm M-F

OFFICIAL USE ONLY

Permit Number_____

□ Inside City limits □ ETJ

Zoning District _____FP_____

PLUMBING PERMIT APPLICATION

☐**One or Two Family Dwelling** ☐**Multi-family Building** ☐**Commercial/Business**

Describe work being done: _____

Address of project_____

Legal Description: _____
(Lot) (Subdivision)

Owner of Property_____
(Name) (Address) (City, State, Zip) (Phone)

Plumbing Contractor_____
(Name) (Address) (City, State, Zip) (Phone)

Description	Fee	Qty	$ Total	Description	Fee	Qty	$ Total
Toilet	11.00			***Gas*** Fireplace	11.00		
Urinal	11.00			Miscellaneous ***Gas*** Appliance	11.00		
Tub and/or Shower	11.00			Private Septic System	83.50		
Sink or Lavatory	11.00			Sand/oil/grease Interceptor	22.25		
Kitchen sink w/disposal	11.00			Kitchen Grease Tap	22.25		
Laundry Tub	11.00			Water treatment/softener	5.25		
Clothes Washer	11.00			Water piping alter/repair	5.25		
Drinking Fountain	11.00			Lawn Sprinkler w/backflow P.	16.50		
Floor Drain	11.00			Backflow preventer 2" or less	13.75		
Roof Drain	11.00			Backflow preventer greater than 2"	27.60		
Miscellaneous Plumbing Fixture	11.00			Public Pool	102.25		
Sanitary Sewer/repair	5.25			Public Spa	68.00		
Electric Water Heater	13.75			Private Pool	68.00		
Gas Water Heater	13.75			Private Spa	34.00		
* ($7.00 first 5 outlets; $1.25 each 6 and up)				Plumbing Issuance Fee	25.00		25.00
Gas piping system (# of outlets)	*			***Total Plumbing Permit Fee***			

I hereby state that that the information submitted on this application is accurate and correct. I recognize that the issuance of this building permit shall not grant approval to violate any of the provisions of the building codes or zoning ordinances enforced by this jurisdiction, state or federal law; and that this permit shall not prevent the building official from requiring construction to be in compliance with all applicable code provisions during field inspections. This permit shall become null and void if no construction work has commenced within 180 from date of issuance or if work has commenced then stopped for more than 180 days. This building permit is issued for the express purpose of work stated on this application and shown on the approved plans. Any changes to the construction plans that effect area or scope of work shall be approved by the building official's prior to construction and may require another permit application. No permit fee refunds are allowed if work has commenced or if work has not commenced and more than 180 days has elapsed after issuance date.

Applicant Name (Print clearly):_____**Signature:**_____**Date:**_____

Contact Name (Print clearly):_____**Phone:**_____**Fax:**_____
Person to answer questions regarding construction drawings and other code compliance issues.

Contact Email Address (optional)_____

OFFICIAL USE ONLY
Approving Official: _____**Date:**_____
Notes: