



**Public Health**  
Prevent. Promote. Protect.  
**Perry County**  
Health Department

**NO ISOMETRIC  
DRAWING  
NO PERMIT**

**Perry County Health Department**  
409 Lincoln Park Drive - P.O. Box 230  
New Lexington, OH 43764  
Phone: 740-342-5179 Fax: 740-342-5540

**Isometric Drawing  
Required**

**Plumbing permit  
applies to job  
location**

**Residential Application for Plumbing Permit/Plan Review**

**Applicant: check one** ☐ Plumbing Contractor ☐ Homeowner

**Job Site Information**

Permit No.	Date Received
Name/Company	
Address (number & street)	
City	State
Phone Number	Contractor Registration No.

I agree to install the plumbing in accordance with the plans as approved by the Perry County Board of Health.  
I further agree to call for inspection(s) as required by the Board section 4101:3-1 thru 4101:3-13 O.A.C.

**Signature of Plumbing  
Contractor/Homeowner**

Street Address of Job		
City	Township	
Building Owner's Name	Phone No.	
Building Owner's Address		
City	State	Zip
Building Type: <input type="checkbox"/> New <input type="checkbox"/> Existing <input type="checkbox"/> Apartments <input type="checkbox"/> home		

**Water Temps**

Inspector \_\_\_\_\_  
Witness \_\_\_\_\_  
W.H. \_\_\_\_\_  
Water Pressure # \_\_\_\_\_  
Lav \_\_\_\_\_  
Sho \_\_\_\_\_  
Bathtub \_\_\_\_\_

**Inspections**

Underground \_\_\_\_\_  
Rough In \_\_\_\_\_  
Stack Out \_\_\_\_\_  
Sewer \_\_\_\_\_  
Final \_\_\_\_\_

Date of Application:

Cash:

Check:

Receipt #:

*Permits left dormant for more than one year are subject to review and revocation.*

Additional Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Revised 12/3/24**



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Complete job site address \_\_\_\_\_

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

Office Use Only

↓	Fixtures	No. Fixtures	↓	Fixtures	No. Fixtures
1	Air Admittance Valve		21	Pressure Reducing Valve	
2	Automatic Washer		22	Recirculating Pump/Line	
3	Backflow Devices		23	Sewage Ejector	
4	Backwater Valve		24	Shower Stall	
5	Bathtubs		25	Custom Built Shower	
6	Bidets		26	Sink, Bar	
7	Booster Pump		27	Sink, Bathroom	
8	Building Drain		28	Sink, Kitchen	
9	Building Sewer	1	29	Sump Pump	
10	Dishwasher		30	Tempering Valve	
11	Drains, Floor /Hub		31	Thermal Expansion Tank	
12	Drains, Roof		32	Trap Primer	
13	Drain, Storm		33	Urinals	
14	Drinking Fountain		34	Toilets	
15	Garbage Disposal		35	Water Heater	
16	Hose Bibb / Outside Faucet		36	Water Softener/RO	
17	Ice Maker Outlet		37	Water Service	
18	Inside Water Piping	1	38	Other	
19	Lawn Irrigation		39	Co. Water Reinspection	
20	Laundry Tub			<b>Total fixture count:</b>	
				<b>Plan Review Fees</b>	
				1 – 20 Fixtures	\$40.00
				21 – 40 Fixtures	\$60.00
				41 – 60 Fixtures	\$80.00
				61 – 80 Fixtures	\$100.00
				80 +	\$150.00

### Plumbing Fixture Worksheet

**Permits left dormant for more than one year are subject to review and revocation.**

Reinspection Fee ..... \$50.00 (must be paid before final)  
Application fee..... \$ 50.00  
Homeowner Registration.....\$50.00..... \$  
Total fixture count from above: .....X \$12.00..... \$  
Plan review fee..... \$  
Penalty for Installing Plumbing Prior to Permit (\$150.00 Penalty) ...\$

Total Plumbing Fees by totaling entries from above ..... \$

