



MIDDLE DEPARTMENT INSPECTION AGENCY, INC.

App. No.:

APPLICATION FOR PLUMBING/MECHANICAL INSPECTION

**APPLICANT: PLEASE PRINT FIRMLY.** \_\_\_\_\_ Date \_\_\_\_\_

Municipality \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_

Lot \_\_\_\_\_ Block \_\_\_\_\_ Street Address \_\_\_\_\_ Zip \_\_\_\_\_

Owner \_\_\_\_\_ Plumbing Permit # \_\_\_\_\_

Occupied As \_\_\_\_\_ Heating Permit # \_\_\_\_\_

Occupant \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

T/A \_\_\_\_\_ License # \_\_\_\_\_

Applicant's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_

Municipal Water

Municipal Sewer

Septic System

Well Water

Building: New  Old

Work: New  Additional

Submit with two sets of plans

**Call 24 Hours Prior to Inspection**

List All Equipment Below					
Piping in Walls		Water Closet		Grease Trap	Other:
Piping in Slab		Urinal		Oil Separator	
Sewer Lateral		Bidet		Slop Sink	
Water Lateral		Kitchen Sink		Lawn Sprinkler # Heads	New heating BTU
Stacks		Dishwasher		Sewage Ejector	New Air cond. BTU
Bathtub		Garbage Disposal		Floor Drain	Unit Heaters, each
Lavatories		Laundry Tray		Water Heater	Replace existing heating or A/C
Shower Stall		Clothes Washer		Drinking Fountain	Heat Lines Feet

**FOR AGENCY USE ONLY**

		Inspector's Signature & License #	
A.	Rough Piping 1 to 9 Fixtures Under Slab		
	Each additional 3 or part thereof		
B.	Rough Piping 1 to 9 In Wall		
	Each additional 3 or part thereof		
C.	Final Fix 1 to 9		
D.	Sewer Lateral		
E.	Water Lateral		
F.	Special Device		
G.	Lawn Sprinkler System		
H.	Cross Connection or Back Flow preventor		
I.	Renovation or replacement (1) inspection		
J.	Other:		
A.	New heating 1 - 100,000 BTU		
	Each additional 20,000 BTU or part		
B.	New air conditioning 1 - 60,000 BTU		
	Each additional 12,000 BTU or part		
C.	Unit Heaters, each		
D.	Replace existing heating or A/C		
E.	Heat Lines 1 to 75 feet		
F.	Each additional 25 feet or part		
G.	Other:		
<b>TOTAL FEE</b>			

Plan Review \_\_\_\_\_

Underground Rough \_\_\_\_\_

Sewer Rough \_\_\_\_\_

Wall Rough \_\_\_\_\_

Final \_\_\_\_\_

Other: \_\_\_\_\_

Date Inspected: \_\_\_\_\_ Check \_\_\_\_\_

Approved  Rejected

Approved  Rejected

Approved  Rejected

Approved  Rejected

Approved  Rejected

Approved  Rejected

Approved  Rejected

Progress  Inc.  Locked

Violation  Work Comp.  Inc.

Other Side

Notified - Municipality  Date \_\_\_\_\_

Contractor  Date \_\_\_\_\_

Fee Paid  Invoice # \_\_\_\_\_

Charge  Check # \_\_\_\_\_