



Community Services Building
 3001 32 Avenue, Vernon BC V1T 2L8
 (250) 550-3634 Fax: (240) 545-5309
buildingcounter@vernon.ca
www.vernon.ca

CHECKLIST

PLUMBING & SITE SERVICING (NON-COMPLEX BUILDINGS) NEW/ALTERATIONS/RELOCATIONS

OFFICE USE ONLY

Application Received Date: _____

Permit / File No: _____

DOCUMENTATION REQUIRED BEFORE ACCEPTANCE OF PLUMBING PERMIT APPLICATION	Submitted (√)	N/A (√)
Plumbing Permit Application forms signed (separate reference document)	<input type="checkbox"/>	
Plumbing Fixture Checklist (separate reference document)	<input type="checkbox"/>	
Damage to Public Works (separate reference document)	<input type="checkbox"/>	
Size of Existing Water Service Pipe _____ (inch) _____ (mm)	<input type="checkbox"/>	
Proposed work to be done by: <input type="checkbox"/> Home Owner <input type="checkbox"/> Plumbing Contractor Trade Qualification # _____ Business Licence # _____	<input type="checkbox"/>	
The following items may be required for further review (when applicable). Please contact the Building Department at 250- 550- 3634 if you require further clarification.		
Design Drawings (plumbing layout) - Civil Site Servicing must be SEALED BY REGISTERED ENGINEER	<input type="checkbox"/>	<input type="checkbox"/>
Letters of Assurance – Schedule B (Civil, Mechanical, Fire Suppression Engineer). <input type="checkbox"/> Certificate of Insurance also required.	<input type="checkbox"/>	<input type="checkbox"/>
Title Search (must be current within 30 days) Title Transfer if new ownership. <input type="checkbox"/> 1 copy of applicable Title Charges may be required.	<input type="checkbox"/>	<input type="checkbox"/>
OFFICE USE – PERMIT SUBMISSION Screened by: _____ Date: _____ <input type="checkbox"/> ACCEPTED – for Application <input type="checkbox"/> RESUBMIT – Insufficient information for application as noted		