Permit	No.:	
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## ALSACE TOWNSHIP MEP PERMIT APPLICATION

Date of Application:				
Name of Applicant:			Phone:	
Address:			Cell;	
Name of Property Owner:			Phone:	
Address:			Cell:	
Site Address:				
Subdivision Name and Lo	No. (if applicat	ole):		
Estimated Cost of Constru	ction:			
Check appropriate box:	☐ Mobile Ho	me or Manufactured [	Owelling	
☐ Two Family Dwelling	☐ Apartment	Building or Condomir	nium	
☐ Sewer Lateral ☐ W	/ater Lateral [	☐ Non-Residential A	pplication: Specify:	
Please Note: All appli	cations must mercial applic s signed and	be accompanied k	by a floor plan drawing of the project.  companied by completed plumbing ed architect or professional	
I hereby certify that the	information he	ereon and herewith i	s true and correct to the best of my knowle	dge
Applicant's Signature			Date:	
	Electric Service Test	ce	Plumbing	
Plan Review		Permit	Total Fee	