Plumbing Permit Application

Village of Sebring Ohio 135 East Ohio Avenue Phone (330) 938-9340 Fax (330) 938-3425

Job Location:		
Owner Addre	ss:	
Phone/Cell: _		
Contractor Na	ame:	
Address:		
City:		Zip Code:
Phone:		Fax:
Description of work being performed:		
Estimated cos	st of work being perform	ned:
	FOR OFFICE	USE ONLY
Permit Numb	er:	
Permit Fees:	\$50.00 + .50 State Fees	Total Charge \$50.50
Check #	Cash	Dehit/Credit Card Type