

Warren County Health Dept.
416 S. East Street
Lebanon, Ohio 45036
(513) 695-1533
(513) 695-1476

FOR OFFICE USE ONLY Permit No. _____ Fee: \$40.00 _____ Date: _____
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For: City of Mason
Water Service Line
Installation Permit Application

Application is hereby made for a permit to install a water service line from the water meter to the building foundation as described in this application and to be installed in accordance with the Plumbing Code of the State of Ohio.

Owner/Builders Name: _____

Installers Name: _____

Job Location/Address _____

Address: _____

City: _____

Phone No.: _____

Applicant's Signature

Date

Inspection/Approval

Date: _____

Inspector: _____

Comments: _____

For Office Use Only

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