



Town of Mills
 704 Fourth Street / PO Box 789
 Mills, WY, 82644
 307-234-6679

Permit # _____

Fee \$ _____

Plumbing Permit

PROPERTY INFORMATION			
OWNER:			
ADDRESS:			
CITY:			STATE:
TELEPHONE:			CELL:

PERMIT INFORMATION							
This Plumbing Permit Involves: <i>(Select One)</i>		<input type="checkbox"/> SINGLE-FAMILY, DUPLEX OR TOWNHOUSES (RESIDENTIAL ONLY)			<input type="checkbox"/> MIXED-USE		
		<input type="checkbox"/> MULTI-FAMILY (RESIDENTIAL ONLY)			<input type="checkbox"/> COMMERCIAL OR INDUSTRIAL (NON RESIDENTIAL)		
This Plumbing Permit Relates To: <i>(Select One)</i>		<input type="checkbox"/> CONSTRUCTION OF NEW BUILDING			<input type="checkbox"/> ALTERATION OR ADDITION TO AN EXISTING BUILDING		
		<input type="checkbox"/> CONSTRUCTION OR MODIFICATION OF A NON- BUILDING STRUCTURE					
Has a Building Permit Been Obtained for this Project? : <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT REQUIRED PERMIT #							
The Proposed Work Will Be Located: <input type="checkbox"/> Interior Only <input type="checkbox"/> Exterior Only <input type="checkbox"/> Interior & Exterior							
No.	PLUMBING	No.	PLUMBING	No.	GAS	No.	MISCELLANEOUS
	Toilet		Drinking Fountain		Dryer		Water Line Replacement
	Bath Tub		Water Softener		Central Heat		Sewer Line Replacement
	Shower		Washing Machine		Floor Furnace		Sprinkler System
	Lavatory		Dish Washer		Gas Range		Hose Bibs
	Floor Drain		Service Sink		Unit Heater		Water/Sewer Line Repairs
	Water Heater		Sump		Patio Grill		Fire Line
	Urinal		Kitchen Sink		Inside Gas Line		Meter Pit
	Laundry Tray		Other		Outside Gas Line		Other

CONTRACTOR INFORMATION			
NAME:			
ADDRESS:			
CITY:		STATE:	
		ZIP CODE:	
TELEPHONE:		CELL:	
OR <input type="checkbox"/> OWNER IS CONTRACTOR			
APPLICANT SIGNATURE:			APPLICATION DATE:

TOWN OFFICIAL	
APPROVAL SIGNATURE:	APPROVAL DATE:

Permit Issued Subject To Provisions of Town Ordinance