



Ashtabula County Health Department

12 West Jefferson, Jefferson, Ohio 44047

Tel: 440-576-6010 Option: 3 Fax: 440-576-0085

Commercial Plumbing Plan Review

****The cost of the plan review is \$200.00****

Date: _____

Name of Property Owner: _____

Mailing Address of Property Owner: _____

Telephone Number of Property Owner: _____

Name of Job: _____

Location of job (Township, Street Address, Directions, ETC.) :

Plumber's Name & Phone #: _____

Plumber's Address: _____

Applicant's Name (Please Print): _____

Applicant's Signature: _____

Applicant's Address & Phone #: _____

Applicant's Email Address: _____

Please Do Not Fill Out Below This Line *Office Use Only*

Type of Building: _____

Number of Fixtures: _____

Number of Ft. of Sanitary or Storm Sewer: _____

Number of Roof Drains: _____

Type of Sewage Treatment: _____

Date Of Plumbing Plan Review: _____

Plumbing Plans Examiner: John Dietrich: _____

Approved: _____ Disapproved: _____

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|----------------------|--|
| Plumbing Plan Review | |
| Receipt Number | |
| Fee Paid | |
| Date Paid | |



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Comments: _____

Services Performed

| | | | | | |
|-----------------------------|--|-----------------------------|--|----------------------|--|
| Water Closet | | Soda Fountains | | Clinical Sinks | |
| Lavoratories | | Floor Sinks | | Lab Sinks | |
| Bathtub | | Sullery/ 3 Comp. Sink | | Pharmacy Sinks | |
| Bathtub Whirlpool | | Bar Sink | | Plaster Sinks | |
| Shower | | Sewage Ejectors | | X-Ray Sinks | |
| Sink, Domestics | | Sump Pumps | | Baptismal Fount | |
| Laundry Tub | | Dental Cuspidors | | Hot Water Dispensers | |
| Floor Drains | | Dental Lavoratories, Chairs | | Water Heater | |
| Automatic Washers | | Dilution Sumps | | Water Softeners | |
| Dishwashers | | Chemical Sinks | | Backflow Devices | |
| Garbage Disposals | | Sterilizers | | Water Piping System | |
| Urinals | | Bedpan Washers | | Storm, Roof Drains | |
| Drinking Founts | | Bidet | | Hydrotherapy Baths | |
| Service Sinks | | Ice Makers | | Others | |
| Shampoo Bowls | | Morgue, Autopsy Table | | Dialysis Box | |
| Wash Fountains | | Eye Wash/Emergency | | | |
| Grease/Kitchen Interceptors | | Aspirators | | | |
| Garage/ Oil Interceptors | | Surgical Sinks | | | |
| Sand Interceptors | | Instrument Sinks | | | |
| Main Backflow \$40.00 | | | | | |
| (A) Totals | | (B) Totals | | (C) Totals | |

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