Building Division
100 John West Way
Box 1000
Aurora, ON L4G 6J1
(365) 500-2081
building@aurora.ca

TOWN OF AURORA
Planning and Development Services

PLUMBING AND DRAIN PERMIT

DATE		
ADDRESS		
LOT #	**PLAN**	**BLOCK/UNIT**

APPLICANT	**OWNER/LEASEE (if different from Applicant)**
NAME	**NAME**
ADDRESS **UNIT**	**ADDRESS** **UNIT**
MUNICIPALITY **POSTAL CODE** **TELEPHONE**	**MUNICIPALITY** **POSTAL CODE** **TELEPHONE**
EMAIL	**EMAIL**

Fixtures	**#**		**#**	Complies With Quantity	Water Service Pipes	Sanitary Drains	Storm Drains
Water Closet (Toilet)		Manhole					
Wash Basin		Catch Basin		50mm (2”)			
Bathtub		Rain-Water Hopper		100mm (4”)			
Shower Stall		Area Drain		150mm (6”)			
Kitchen Sink		Testable B.F.P		200mm (8”)			
Laundry Tub		Other		250mm (10”)			
Urinal		**Residential Only**		300mm (12”)			
Bidet				List each size greater than 300mm (12”)			
Floor Drain		Water Service					
Drinking Fountain		Sanitary Drain					
Bar Sink		Storm Drain		Other (Specify):			
Service Sink		Conversion		Type of Material Used On Project			
Inceptor					Specify	Specify	Specify
Backflow Preventer				☐ Non-Comb ☐ Comb			
Other (Specify):							
Total Fixtures							

This application is made to the Town of Aurora

I, the undersigned certify that the above information is complete and correct in every respect and that all materials, fixtures and workmanship will conform with the Ontario Building Code and the Town by-laws and policies. The undersigned hereby permits the Town of Aurora, its employees, agents, contractors or assigns to enter into the lands to conduct whatever inspections and tests that may be necessary.

Signature of Owner or Authorized Agent of Owner *Date*