

## DISTRICT OF KITIMAT



BUILDING INSPECTION DEPARTMENT  
Ph. 250-632-8900 Fax: 250-632-4995

### HOMEOWNER'S PLUMBING DECLARATION

I, \_\_\_\_\_, declare that I am the owner of the single family dwelling and lives, or intends to live, in such dwelling at (Street Name and Number)

\_\_\_\_\_  
Kitimat, BC, and hereby make application for a PLUMBING PERMIT.

I further certify that there is no other dwelling or premises within or directly attached to the dwelling.

That no person is being paid to do or assist me in doing the work, and that no persons other than my immediate family resides at this address.

I understand that if at any time during the inspection process the District of Kitimat Building Inspector determines that I am not qualified to do the plumbing installation, I must retain the services of a licensed plumbing contractor to complete and/or correct the work.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ Year \_\_\_\_\_ At Kitimat, BC.

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Signature of Witness)

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#### For Office Use Only:

Building Permit #: \_\_\_\_\_