



City of Annapolis
 Department of Planning and Zoning
 145 Gorman Street Fl 3
 Annapolis, MD 21401-2529

| | |
|-------------------|------------|
| FOR CITY USE ONLY | |
| PERMIT # | PL000-0144 |
| ISSUED | 2-21-20 |
| EXPIRES | 1-6-22 |

Permitting@annapolis.gov • 410-260-2200 • Fax 410-263-9158 • TDD use MD Relay or 711 • www.annapolis.gov

Plumbing Permit Application

All work must be done in accordance with the State Plumbing Code as adopted by the City of Annapolis. CAUTION: Plastic water service lines will require the review of the electrical system to assure proper ground. Contact an electrical contractor.

Plumbing Gas Water/Sewer Connection Residential Commercial

Job location 954 BAY RIDGE RD
 Property Tax ID _____ Related Building Permit # BLD 19-0471
 Property owner GFS Realty LLC
 Address _____
 Occupant ROCCO'S PIZZA Phone, day _____
 Lic. Master Plumber name ARTHUR MYER City license # _____
 Trading as ARTHUR E. MYER PLUMBING + HEATING INC Phone, day 301-249-5307
 Mailing address 210 HOLLY RD EDGEWATER MD 21037

Meter: Existing New or Relocate If new or relocate, provide BGE WMS # _____
 Gas data: Natural Bottled Pipe size: 2 1/2" _____ 2 lb Low pressure

| | Qty | BTU | | Qty | BTU | | Qty | BTU | Total BTUs |
|--------------------------|-----|-----|--------------|-----|-----|-----------|-----|-----|------------|
| Boiler | | | Range | 10 | 350 | Fireplace | | | |
| Furnace | 1 | 225 | Water heater | 1 | 199 | Generator | | | |
| Other, specify use _____ | | | | | | | | | |

| Floor | B | 1 | 2 | 3 | 4 | Floor | B | 1 | 2 | 3 | 4 | Qty |
|----------------------|---|---|---|---|---|--------------------|---|---|---|---|---|------------------|
| Water closet | | 2 | 1 | | | Water heater | | 1 | | | | Utility work |
| Bath tub | | | | | | Urinal ICE MACHINE | | 1 | | | | Sewer insp |
| 3 COMP. SINK Shower | | 1 | | | | Drinking fountain | | | | | | Water insp |
| Lavatory | | 5 | 1 | | | Dishwasher | | 1 | | | | Grease trap |
| Sink | | 3 | | | | Garbage disposal | | | | | | Oil interceptor |
| TOP SINK Laundry tub | | 1 | | | | Washer connection | | | | | | G.R.U. |
| TOP BASIN Hydrant | | 2 | | | | SODA Sump pump | | 1 | | | | Back flow device |
| FLOOR DRAIN SINK | | 6 | | | | Sewer ejector | | | | | | Back flow test |
| FLOOR DRAIN Other | | 2 | | | | Other TEA | | 1 | | | | Other |

Additional comments

I certify and agree as follows: that I am authorized to make this application; that the information is correct; that I will comply with all conditions, regulations and codes of the City of Annapolis which are applicable hereto; that I will perform no work on the above property not specifically described hereon; that the permit is void if authorized work does not commence within 120 days from issue date; that the issued permit is not transferable; that all fees are not refundable; that no work shall be started until permit issued.

Signature of Licensed Plumber/Gas Fitter [Signature] Date 2-21-20

Office Use Only

Total fee due 565.00 Payment received by [Signature] Date 2-21-20

Special conditions if any _____

Plumbing, Gas and Utility work must be performed by a City of Annapolis licensed Master or Journeyman Plumber/Gas Fitter and apprentices must have an apprentice card.