

Under-Slab Drain
and Vent Self-
Certification



The Mayor & Council of Middletown
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Permits&Inspections@middletown.delaware.gov

LOT # _____ SUBDIVISION _____

BUILDING PERMIT # _____ PLUMBING PERMIT# _____

ADDRESS _____

I HEREBY CERTIFY THAT THE DRAIN AND VENT LINES AT THE ABOVE
REFERENCED PROPERTY WERE TESTED ON _____ IN ACCORDANCE
WITH THE REQUIREMENTS OUTLINED IN SECTION 312 OF THE 2018
INTERNATIONAL PLUMBING CODE AS AMENDED BY THE STATE OF DELAWARE
THE DIVISION OF PUBLIC HEALTH, AND MET OR EXCEEDED THOSE
REQUIRMENTS.

TEST OBSERVED BY:

SIGNATURE OF BUILDING PERMIT HOLDER _____

DATE _____

SIGNATURE OF LICENSED PLUMBER _____

DATE _____

Effective on permit apps received on or after 11/11/2019