

Small, Serene, Simply Garnett.

APPLICATION FOR PLUMBING PERMIT

APPLICATION NO	APPROVED BY:	APPROV	/ED DATE:	
	TO BE COMPLETED	BY APPLICANT		
CONTRACTOR		OWNER/OCC	UPANT	
Applicant Name:	I	Phone:		
Jobsite Address:				
Owner Name:		Phone:		
Owner Address:	City:	State:	ZIP:	
Contractor Name:		Phone:		
Mailing Address:	City:	State:	ZIP:	
Structure Type/Fee				
1 or 2 Family Dwelling-\$25.00	New Commercial/Mu	altifamily-\$50.00 A	ll Others-\$40.00	
Estimated Completion Date:				
Work to be Done: Repair/Re	eplace New Wa	ater line Gas line	Interior waste lin	es
	Water heater-Ca	apacity		
Except in case of emergency, pern review and processing. The Zon application, in accordance with City by the applicant.	ing Administrator reserves t	the right to issue or den	ny any permit within 3	30 days of
IT IS THE RESPONSIBILITY (two (2) hours in advance for all 1 inspections. Except in case of eme	required inspections. Permit	holder or representative	must be on-site for a	
All work must be inspected and app	proved before being covered,	and a final inspection is r	required when the job is	complete.
Applicant Signature:		Date:		