

City of Oakwood 4035 Walnut Circle, P.O. Box 99 Oakwood, GA 30566	<h2 style="margin: 0;">Plumbing Permit Application</h2>
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<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Alteration/Repair	Date: ____ / ____ / ____ Permit No. _____ ESTIMATED VALUE (Labor and Materials): \$ _____
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JOB SITE ADDRESS:	PROJECT NAME:	LOT/ SUITE #:
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Property Use:	Zoning Class.:
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Job Description: _____

Property Owner	Name:		
	Address:	State: Zip:	Phone: Email:

Trade Contractor	Name:		State License No.:
	Address:	State: Zip:	Phone: Email:

Type of Service: Public: [] Size: _____ Other: _____ Private: [] Size: _____ Septic Tank: _____ Check if Applicable [] PLUMBING [] FIRE SUPPRESSION Number of Heads: _____	NUMBER OF: Water Heater: _____ Sinks: _____ Dishwasher: _____ Disposal: _____ Toilets: _____ Separate Showers: _____ Tub/Shower Combo: _____ Tubs: _____ Washer: _____ Laundry Tub: _____ Hose Bib: _____ Other: _____
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Notice: No changes shall be made from that which is stated in this application, or in attached plans and specifications, except by submitting a revised application, plans and/or specifications and receiving approval of the Chief Building Inspector for such change. Granting of a permit shall not be construed as a permit for or an approval of any violation of the Building Code or any other state or local law regulating construction or the performance of construction. I hereby certify that I have read and examined this application and the information provided herein is true and correct. I further certify that all construction will comply with the Minimum Building Codes.

Signature of Licensed Cardholder:	Date:
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FOR OFFICE USE ONLY	Accepted by:
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Construction Type:	Occupancy:
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Administrative Fee:	Plan Review Fee:	Permit Fee:	CC Fee:	Total Fee:
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____