PLUMBING PERMIT APPLICATION

EMAIL ADDRESS
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ATHENS-CLARKE COUNTY INSPECTION DEPARTMENT
PHONE: (706) 613-3520 FAX: (706) 613-3527

STREET ADDRESS
120 W. Dougherty Street
Athens, GA 30601

STREET ADDRESS: _____ SUBDIVISION: _____

BLDG/TENANT SPACE#: _____ TAX MAP: _____ BLOCK: _____ LOT: _____

ZONE _____ EXISTING BLDG? Y ☐ N ☐ PRESENT USE: _____

OWNER: _____ ADDRESS: _____

WORK PREFORMED ON: SINGLE FAMILY ☐ DUPLEX ☐ APTS ☐ CONDO ☐ COMMERCIAL _____

CLASS A HOME ☐ MAKE ADDITIONS/ALTERATIONS TO: _____

WORK MUST COMMENCE WITHIN 6 MONTHS OF ISSUANCE AND NOT BE ABANDONED IN EXCESS OF 6 MONTHS OR PERMIT WILL BECOME VOID.

TYPE WATER SERVICE: PUBLIC: ☐ SIZE: _____ OTHER: _____

PUBLIC: ☐ SIZE: _____ SEPTIC TANK: ☐ OTHER: _____

CHECK IF APPLICABLE: PLUMBING ☐ FIRE SUPPRESSING ☐ IRRIGATION ☐

NO.	TYPE FIXTURE	FIXTURE UNITS	TRAP SIZE	REMARKS
				NO. OF
				FIXTURES _____

THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND THE PROPOSED WORK MEETS ALL CODES AND ORDINANCES OF ATHENS-CLARKE COUNTY.

CONTRACTOR _____

STREET ADDRESS _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ DATE _____

STATE LICENSE NO. _____

BUSINESS LICENSE NO. _____

APPLICANT NAME (PRINT) _____

APPLICANT SIGNATURE _____ DATE _____

SHADED AREAS FOR OFFICE USE ONLY

MINIMUM FEE $80.00 X NO. OF UNITS ____ = _____

 # FIXTURES _____ **x $2** = _____

PERMIT TOTAL =$ _____

APPLICATION DATE _____ PERMIT NO. _____ FEE _____

APPLICATION APPROVED _____ DENIED _____ DATE _____