

City of Milledgeville, GA APPLICATION FOR PLUMBING PERMIT

Application Received By _____

PERMIT # _____

Job Address

Applicant to complete numbered spaces only

1. Legal Description	Map # / Parcel #	Block	Tract / Lot _____ See attached Sheet
2. Owner		Mailing Address	Zip Code
3. Contractor		Mailing Address	Phone
4. Architect or Designer		Mailing Address	Phone
5. Engineer		Mailing Address	Phone

7. USE OF BUILDING	COST OF JOB:
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8. Class of Work:

_____ New _____ Addition _____ Alteration _____ Repair _____ Other

9. Describe Work:

"The issuance of this permit authorizes improvements of the real property designated herein which improvements may subject such property to mechanics' and materialmen's liens pursuant to Part 3 of Article 8 of Chapter 14 of Title 44 of the Official Code of Georgia Annotated. In order to protect any interest in such property and to avoid encumbrances thereon, the owner or any person with an interest in such property should consider contacting an attorney or purchasing a consumer's guide to the lien laws which may be available at building supply home centers."

Application Accepted By:	Plans Checked By:	Approved for Issuance By:	PERMIT FEES
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<p>Special Conditions:</p> <p>NOTICE: This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced.</p> <p>I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">No.</th> <th style="width: 90%;">Type of Fixture or Item</th> </tr> </thead> <tbody> <tr><td> </td><td>Water Closet (TOILET)</td></tr> <tr><td> </td><td>Bathtub</td></tr> <tr><td> </td><td>Lavatory (Wash Basin)</td></tr> <tr><td> </td><td>Shower</td></tr> <tr><td> </td><td>Kitchen Sink & Disip.</td></tr> <tr><td> </td><td>Dishwasher</td></tr> <tr><td> </td><td>Laundry Tray</td></tr> <tr><td> </td><td>Clothes Washer</td></tr> <tr><td> </td><td>Water Heater</td></tr> <tr><td> </td><td>Urinal</td></tr> <tr><td> </td><td>Drinking Fountain</td></tr> <tr><td> </td><td>Floor Sink or Drain</td></tr> <tr><td> </td><td>Slop Sink</td></tr> <tr><td> </td><td>Gas Systems: No. Outlets</td></tr> <tr><td> </td><td>Water Pipping & Treating Equip.</td></tr> <tr><td> </td><td>Waste Interceptor</td></tr> <tr><td> </td><td>Vacumn Breakers</td></tr> <tr><td> </td><td>Lawn Sprinkler System</td></tr> <tr><td> </td><td>Sewer</td></tr> <tr><td> </td><td>Cesspool</td></tr> <tr><td> </td><td>Septic Tank & Pit</td></tr> </tbody> </table>	No.	Type of Fixture or Item		Water Closet (TOILET)		Bathtub		Lavatory (Wash Basin)		Shower		Kitchen Sink & Disip.		Dishwasher		Laundry Tray		Clothes Washer		Water Heater		Urinal		Drinking Fountain		Floor Sink or Drain		Slop Sink		Gas Systems: No. Outlets		Water Pipping & Treating Equip.		Waste Interceptor		Vacumn Breakers		Lawn Sprinkler System		Sewer		Cesspool		Septic Tank & Pit
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Signature of Contractor or Authorized Agent _____ Date _____

Signature of Owner _____ Date _____

Job Cost \$ _____

PERMIT COST \$ _____

Permit Validation (Circle One)
 Check Money Order Cash Other

NOTICE: Call 414-4020 for Inspections - 24 Hour Notice Required