2

PLUMBING PERMIT

City of Clarkesville, Georgia

Applicant to complete numbered spaces only.

Permit No. P18-

JOB ADDRESS			
1 LEGAL DESCR.	LOT NO.	BLK	MAP & PARCEL NO.
2 OWNER	MAIL ADDRESS	ZIP	PHONE
3 CONTRACTOR	MAIL ADDRESS		REGISTRATION NO./EXP. DATE
4 PHONE NUMBERS	OFFICE	CELL	
5 ARCHITECT OR DESIGNER	MAIL ADDRESS	PHONE	REGISTRATION NO.
6 ENGINEER	MAIL ADDRESS	PHONE	
7 USE OF BUILDING			

8 **Class of work:** ☐ NEW ☐ ADDITION ☐ ALTERATION ☐ REPAIR

9 **Describe work:**

OWNER

JOB ADDRESS

SPECIAL CONDITIONS:

APPLICATION ACCEPTED BY	PLANS CHECKED BY	APPROVED FOR ISSUANCE BY

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.

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.

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT (DATE)

SIGNATURE OF OWNER (IF OWNER BUILDER) (DATE)

PERMIT FEES

No.	Type of Fixture or Item	Fee	
	WATER CLOSET (TOILET)	$	
	BATHTUB		
	LAVATORY (WASH BASIN)		
	SHOWER		
	KITCHEN SINK & DISP.		
	DISHWASHER		
	LAUNDRY TRAY		
	CLOTHES WASHER		
	WATER HEATER		
	URINAL		
	DRINKING FOUNTAIN		
	FLOOR SINK OR DRAIN		
	SLOP SINK		
	GAS SYSTEMS: NO. OUTLETS		
	WATER PIPING & TREATING EQUIP.		
	WASTE INTERCEPTOR		
	VACUUM BREAKERS		
	LAWN SPRINKLER SYSTEM		
	SEWER		
	CESSPOOL		
	SEPTIC TANK & PIT		
	PERMIT	$	
	TOTAL FEE	$	

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH PERMIT VALIDATION CK. M.O. CASH

Office Use only: Please print 4 copies. Original (Construction Book) | 2 - City Clerk | 1 - Inspector | 1 - Applicant