		* ZONING * PLANNING ent Center, 210 South 7 <sup>th</sup> S FAX 229-276-2608 jmump@crispcounty.com	t, Suite 205 Cordel <u>mdunnava</u> <b>Iumbing Permit</b>	e, Georgia 31015 ant@crispcounty.com	
Commercial				to violo).	
Estimated Cost of Construction (Labor & Materials): Alteration/Repair					
Job Site Add	lress:	Pro	ject Name:	Ра	arcel #:
Property Owner	Name:			Phone:	
	Address:		State: Zip:	Email:	
Contractor	Name:	State License	#:	Phone:	
	Address:		State: Zip:	Email:	
Public:	Type of Service Size: Other:	Number of:			
Private:	Size: Septic Tank:	Water heads:	Sinks:	Dishwasher:	Disposal:
	Check if Applicable	Toilets:	Showers:	Tub/Shower Combo	: Tubs:
Plumbing	Fire Supression	Washer:	Laundry Tub:	Hose Bib:	
Number of Heads:		Other:			

**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:\_\_\_\_\_

\*Permit Issuing Fee: \$35.00 \*Each Fixture/Device \$8.00