

CITY OF WAYCROSS, GEORGIA **DEPARTMENT OF COMMUNITY IMPROVEMENT**

P. O. Drawer 99 – 417 Pendleton Street – Waycross, GA 31502-0099 Tele (912) 287-2944 – Fax (912) 287-2948 – www.waycrossga.com

PLUMBING PERMIT APPLICATION

- INSTRUCTIONS: PLEASE TYPE OR PRINT (IN INK) ALL REQUESTED DATA – (Note: An incomplete application may delay the approval process.)

JOB ADDRESS:PROPERTY OWNER:			SUITE/APT:			
			ADDRESS:	Phon	PHONE:	
APPLICANT:			CONTACT:			
COMPANY NAME:						
	DES	CRIPTION OF WO	ORK TO BE	PERFORMED		
	# of Fixtures	FIXTURE TYPE	# OF FIXTURES	FIXTURE TYPE		
		WATER CLOSET		Ватнтив		
		LAVATORY		SHOWER		
		KITCHEN SINK & DISPOSAL		DISHWASHER		
		Laundry Tray		CLOTHES WASHER		
		DRINKING FOUNTAIN		FLOOR SINK OR DRAIN		
		SLOP SINK		GAS SYSTEM: # OUTLETS		
		WATER PIPING		GREASE INSPECTOR		
		VACUUM BREAKERS		SAND TRAP		
		Sewer		OIL/WATER SEPARATOR		
		BACKFLOW PREVENTER		LAWN SPRINKLER SYSTEM		
		OTHER	'			
such property to Code of Georgia any person with	mechanics' and Annotated. In o an interest in s	l material-mans' liens pursurder to protect any interest i	uant to Part 3 of Ai in such property an er contacting an att	gnated herein which improve rticle 8 of Chapter 14 of Titl Id to avoid encumbrances the orney or purchasing a consu	e 44 of the Official ereon, the owner or	
LAWS, ORDINANCES, INVOLVED IN THIS YREGULATIONS. THE C	POLICIES AND PROWORK SHALL COME FRANTING OF A PER	CEDURES GOVERNING THIS WORK PLY WITH ALL PROVISIONS OF LO	SHALL BE COMPLIED W DCAL, STATE AND FED UTHORITY TO VIOLATE	THE SAME TO BE TRUE AND CORRECTION WHETHER SPECIAFIED HEREIN ERAL LAWS, ORDINANCES, POLIC OR CANCEL THE PROVISIONS OF AN	OR NOT. ALL PARTIES IES, PROCEDURES AND	
IS NOT COMMENCED	WITHIN SIX MONTH		OR ABANDONED FOR A	RMIT BECOMES NULL AND VOID IF T CONTINUOUS PERIOD OF SIX MONT		
SIGNATURE:		Date:	Own	NER: CONTRACTOR:	AGENT:	
.FOR OFFICE US	E ONLY					
Accepted by:		Date:	Approved By	/:	Date:	
					Permit #·	