



ELECTRICAL, PLUMBING & MECHANICAL PERMIT APPLICATION

<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	Permit Number: _____ Please check one: <input type="checkbox"/> Install <input type="checkbox"/> Repair <input type="checkbox"/> Replace <input type="checkbox"/> Meter replacement inspection (Power) <input type="checkbox"/> Gas Line (Gas Service) ESTIMATED VALUE (Labor & Materials): _____ Date: _____
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Applicant Name: _____ Phone: _____

Email: _____ Fax: _____

JOB SITE ADDRESS: _____

SCOPE OF WORK: _____

Property Owner	Name: _____ City: _____ State: _____ Zip: _____
General Contractor	Name: _____ Phone/Cell: _____ Email Address: _____

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. **There will be a \$50 re-inspection fee for each failed inspection.**

Signature of Permittee _____

Date _____

Applicant MUST attach a copy of:

- Driver's license
- State certification card
- Business license (Occupational Tax Certificate)

Admin Fee \$ _____	Permit Fee \$ _____	Total Fee \$ _____
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Fax Affidavit to 678-242-2499 or e-mail to permits@cityofmiltonga.us.