



come to morrow
MORROW, GEORGIA

Planning & Economic Development Department

TRADE PERMIT APPLICATION

ELECTRICAL, *PLUMBING, MECHANICAL/HVAC, & LOW VOLTAGE

1500 Morrow Rd. Morrow, GA 30260 678.902.0870 (T) 770.960.3002 (F)

Application Date ____ / ____ / ____

PERMIT NO. _____

Type of Permit [CHECK ONE] **Electrical** ***Plumbing** **Mechanical** **Low Voltage**

Type of Work: Residential Commercial
 Install Repair Replace

Estimated Value of Work (Labor and Materials):
\$ _____

Scope of Work: _____

PROPERTY INFORMATION

Property Address: _____

Existing Building? Yes No

Owner Name: _____ Phone # _____

Street Address _____ City _____ State _____ Zip Code _____

Email Address: _____

CONTRACTOR INFORMATION

Business Name: _____

GA State License Number: _____

Contact Name: _____ Phone #: _____

Street Address _____ City _____ State _____ Zip Code _____

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 give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Print name of Contractor

Signature of Contractor

Date

Applicant **MUST** provide the following:

- 1) Driver's License, 2) State Certification Card, and 3) Business License (Occupation Tax License)
- 4) Homeowner's Affidavit (*If Homeowner will perform work*)

FOR OFFICE USE ONLY : (Processed and entered into the system)

ZONING VERIFIED: _____ ACCEPTED BY: _____ DATE RECEIVED: _____

APPLICATION/PERMIT FEE: \$80.00 PAYMENT METHOD: CHECK CHECK # _____ CREDIT/DEBIT CARD MONEY ORDER

APPROVED/DENIED BY: _____ DATE: _____



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Plumbing Permit Application (2 of 2)

Building Permit #: _____

Local Business License # _____

Residential

Commercial

Write in the number of fixtures to be installed, repaired or replace for residential or commercial use:

___ Water Heater

___ Drinking Fountain

___ Sewer line (_____ feet)

___ Water Closet

___ Washing Machine

___ Septic Tank

___ Sink/Basin

___ Laundry Tub/Slop Sink

___ Urinals

___ Bath Tub/Shower

___ Floor Drain/Roof Drain

___ Lavatory

___ Dishwasher

___ Disposal

___ Other _____

___ Grease Trap (size _____) ___ Oil Inceptor

___ Church Baptistry

___ Inside roof drains

___ Sewer Ejector

___ Gas Line

___ Water Line

***Processed Piping/Outside & Inside Sprinkler Systems**

All plumbing submittals require the following:

- Three (3) sets of engineered, signed and stamped plans
- One (1) CD should be submitted with the [Building Permit Application](#) and appropriate fees
- Plan Review process is 2 weeks minimum
- A Trade Permit Application must be submitted; there is no fee at this time
- Provide a copy of the Contractor's:
 - State Plumbing License Card
 - Local Business License Card
 - Driver's License