



**Peach County**  
**410 Old Macon Rd.**  
**Fort Valley, GA 31030**  
**inspectionsga@bureauveritas.com**

## Plumbing Permit Application

- Residential
- Commercial
- Alteration/Repair

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Permit No. \_\_\_\_\_

Estimated Cost of Construction (Labor and Materials): \$ \_\_\_\_\_

**JOB SITE ADDRESS:**

**LOT/ SUITE #:**

**PROJECT NAME:**

Property Use:

Zoning District:  
Map and Parcel:

Job Description: \_\_\_\_\_  
 \_\_\_\_\_

**Property Owner**

Name:

Address:

State:  
Zip:

Phone:

Email:

**Trade Contractor**

Name:

State License No.:

Address:

State:  
Zip:

Phone:

Email:

**Type of Service:**

Public: [ ] Size: \_\_\_\_\_ Other: \_\_\_\_\_

Private: [ ] Size: \_\_\_\_\_ Septic Tank: \_\_\_\_\_

**Check if Applicable**

[ ] PLUMBING [ ] FIRE SUPPRESSION

Number of Heads: \_\_\_\_\_

**NUMBER OF:** Water Heater: \_\_\_\_\_ Sinks: \_\_\_\_\_

Dishwasher: \_\_\_\_\_ Disposal: \_\_\_\_\_

Toilets: \_\_\_\_\_ Separate Showers: \_\_\_\_\_

Tub/Shower Combo: \_\_\_\_\_ Tubs: \_\_\_\_\_

Washer: \_\_\_\_\_ Laundry Tub: \_\_\_\_\_

Hose Bib: \_\_\_\_\_ 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 or Applicant:

Date:

**FOR OFFICE USE ONLY**

Accepted by:

Construction Type:

Occupancy:

Administrative Fee:

\$ \_\_\_\_\_

Plan Review Fee:

\$ \_\_\_\_\_

Permit Fee:

\$ \_\_\_\_\_

CC Fee:

\$ \_\_\_\_\_

Total Fee:

\$ \_\_\_\_\_