

Town of Carl 1690 Carl-Bethlehem Road Auburn, GA 30011 admin@townofcarl.gov	<h2 style="margin:0;">Trades Permit Application</h2>
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<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Alteration/Repair	Permit No. _____ Expiration Date: ____/____/____ Estimated Cost of Construction (Labor and Materials): \$ _____
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JOB SITE ADDRESS:	LOT/ SUITE #:	PROJECT NAME:
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Property Use:	Parcel #:
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Job Description: _____

Trades (select all that apply):
 Electrical
 Mechanical (HVAC, fuel/gas)
 Plumbing

Property Owner	Name: _____		
	Address: _____	State: _____ Zip: _____	Phone: _____ Email: _____

Trade Contractor	Name: _____		State License No.: _____
	Address: _____	State: _____ Zip: _____	Phone: _____ Email: _____

Mechanical Permitting

Total Electric
 Total Gas
 Both Gas and Electric

Number of Tons: _____ Number of BTUs: _____

Heating and/or Cooling Units: _____

Supply and Return Drops: _____ Exhaust Fans: _____

Grease/Vent Hood: _____ Other: _____

Natural Gas
 L.P.G

FURNACE MBTU _____

FIREPLACE MBTU _____

OVEN/RANGE MBTU _____

DRYER MBTU _____

WATER HEATER MBTU _____

Electrical Permitting

POWER POLE TEMPORARY POWER POLE

CHANGE OF SERVICE

CHANGE PANEL BOX

OTHER (EXPLAIN) _____

VOLTAGE _____ PHASE _____ AMPS _____

CONDUCTOR TYPE & SIZE _____

Building Entry:

ABOVE GROUND UNDERGROUND

Plumbing Permitting		Fixture	Quantity	
<input type="checkbox"/> Public Sewerage: Size _____ Other Information _____		Water Heater	_____	
		Sink	_____	
		Dishwasher	_____	
		Toilet	_____	
<input type="checkbox"/> Private Septic: Size _____ Septic Tank _____		Shower Only	_____	
		Tub/Shower	_____	
		Tub Only	_____	
Check if Applicable:		Clothes Washer	_____	
<input type="checkbox"/> Plumbing <input type="checkbox"/> Fire Suppression		Laundry Tub	_____	
Number of Heads _____		Hose Bib	_____	
		_____	_____	
		_____	_____	
SERVICE PROVIDER(S):				
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: \$ _____