

City Hall

City of Bogart

125 Main St.

(770) 725 – 7386



P.O. Box 206

(770) 725-5988 Fax

Bogart, GA 30622

### City of Bogart Residential and Commercial Plumbing Permit Application

**PERMIT FEE \$50**

**THIS PERMIT BECOMES NULL & VOID IF AUTHORIZED WORK OR CONSTRUCTION IS NOT STARTED WITHIN 6 MONTHS FROM THE ISSUED DATE OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS STARTED.**

Street Address \_\_\_\_\_ Subdivision: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Is this an Existing Building? Y \_\_\_\_\_ N \_\_\_\_\_ Present Use: \_\_\_\_\_

**Work Performed on:**

Single Family \_\_\_\_\_ Duplex \_\_\_\_\_ Condo \_\_\_\_\_ Mobile Home \_\_\_\_\_ Commercial \_\_\_\_\_

or Making additions/alterations to: \_\_\_\_\_

Enter the Type and Number of Fixtures Being Installed, Replaced or Repaired

Type of Fixture	# Units	Trap Size	# Type of Fixture	Units	# Trap Size
1			7		
2			8		
3			9		
4			10		
5			11		
6			12		
Public water <input type="checkbox"/> Y <input type="checkbox"/> N		Public Sewer <input type="checkbox"/> Y <input type="checkbox"/> N		Private Well <input type="checkbox"/> Y <input type="checkbox"/> N	
				Other: _____	
Check if applicable: Plumbing _____ Fire Suppression _____ Irrigation _____			Septic Tank <input type="checkbox"/> Y <input type="checkbox"/> N County Septic Permit No. _____		
Please attach copy to application. No Permit will be issued without this.					

**Contractor:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_  
**Occupational Tax No.** \_\_\_\_\_  
**State Certification No.** \_\_\_\_\_  
 Please attach copy of State Certification

*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 City of Bogart Codes 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.*

\_\_\_\_\_ **Date:** \_\_\_\_\_  
**Contractor's Signature**

**Note:** All inspections will be completed by Oconee County Inspections Officers for which a 24 hour notice must be given.

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For Office Use only:

Date Application Filed: \_\_\_\_\_ Permit Fee: \$ \_\_\_\_\_  
 Application: Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_  
 Permit No: \_\_\_\_\_  
 \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature of Official Issuing Permit per Inspector's approval

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