



# Plumbing Permit

City of Rincon, Georgia  
 Planning and Development Services  
 Phone: (912) 826-5996 / Fax: (912) 826-2083  
 www.cityofrincon.com

**Applicant to complete all that apply.**

**Date:** \_\_\_\_\_

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<b>1. Job Address</b>	<b>2. Parcel and Lot #</b>
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<b>3. Owner</b>	<b>Mailing Address</b>	<b>Phone</b>	<b>Email Address</b>
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<b>4. Plumbing Contractor</b>	<b>Mailing Address</b>	<b>Phone</b>	<b>Email Address</b>
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**5. Type of work:**  New  Addition  Renovation  Repair

**6. Describe Work:**

**Project Square footage:** \_\_\_\_\_ **Total Valuation of Project:** \_\_\_\_\_

**Required:**

- Copy of plumber's **TRADE** license.
- Copy of plumber's **BUSINESS** license.
- Copy of building layout, if applicable.
- Plumber **AND** the homeowner / owner **MUST** sign this application.
- If using a grinder pump, it must have a 10' clearance from the house and other structures.

**NOTICE**

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 12 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

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.

**Certified Plumber Signature:** \_\_\_\_\_

**Home Owner / Owner Signature:** \_\_\_\_\_

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Planning and Development Inspector