

PLUMBING PERMIT APPLICATION

BUILDING and NEIGHBORHOOD SERVICES

615-794-7012 Office 615-591-9066 Fax

GENERAL INFORM	ATION					
Subdivision:		Lot #:	Building	ding Permit #:		
Project Address:			Suite/Unit #:			
Project Name:			Res	Residential Commercia		
Property Owner/Genera	al Contractor:					
Property Owner's/General Contractor's Phone Number:						
CONTRACTOR INFORMATION						
Plumbing Contractor: _						
Master Plumber Licens	e #:: Ex	xpiration Date:		_		
Street Address:						
City:	State:	Zip:	E-mail:			
Office phone:	Cell Phone	e:	Fax	« :		
CHECK ALL THAT APPLY						
\$ CONTRACT AMOUNT (Include Materials and Labor)						
New Construction	Water Heater Change Out	Other (specif	fy below)			
Sewer Line	Addition of Fixtures			BNS OFFI	CE USE ONLY	
Water Line	Gas Line Test			PERMIT#		
Grinder Pump	Septic System Present					
						
Narrative of Scope of Wo	rk					

Note: Applications can be emailed to <u>cofpermitapp@franklintn.gov</u>. Contractor is responsible for confirming that sewer and water connection fees have been paid (provide receipts) when applying for sewer and water line permits. Incorrect or incomplete information may result in permit revocation. Grinder pump agreement and approval required for grinder pump connection to sewer tap.

Date: __