

CITY OF GREENVILLE PERMIT APPLICATION FOR PLUMBING

Date: _____
 Property Owner Name: _____
 Property Address: _____

Contractor's Business Name: _____
 State of Alabama Plumber's and Gas Fitters License #: _____
 Mailing Address: _____

Contact Person: _____
 Business Phone: _____
 Mobile Phone: _____
 Email Address: _____

Job Value: _____
 (Total cost of the job, including all materials and cost of labor)

	Quantity		Quantity		Quantity
Toilet		Pot Filler		Hose Bib	
Tub		Washing Machine		Floor Drain	
Shower		Water Heater		Grease Trap	
Tub/Shower		Laundry Sink		OTHER:	
Lavatory		Mop Basin			
Kitchen Sink		Bidet			
Dishwasher		Urinal			
Ice-Maker		Water Fountain			

Installation, Repair, or modification of (Check all that apply):

Sewer Line	
Septic Tank	
Water Lines	

Please email or submit in person any plans/drawings for the above described work.
 Email permit application to: permits@cityofgreenville.com