

APPLICATION FOR ELECTRICAL AND PLUMBING
PERMIT

City of Nicholson Building Inspection Office
175 Lakeview Dr Nicholson, GA 30565
Phone: **706/296-0581** Fax: 706/757-2351

Fill out the following information and turn in with all supplemental by the Nicholson Building Permit office. Any application that is to be found incomplete **will not be issued a permit.**

Owner's_Name: _____

Phone: _____

Current_Address: _____

Construction_Site_911_Address _____

Subdivision: _____ Lot# _____

Tax Parcel # _____

Electrical

Contractor:

Address:

Phone: _____ Cell #: _____ Business

License # _____ State License # _____

Size of Service Panel; (200 amp, 400 amp or three phase) _____

Plumbing

Contractor: Address:

Phone: _____ Cell # _____

Business License #: _____ State License #: _____

Numbers Of:

Toilets: _____ Bathroom Sinks _____ Separate Showers _____

Bath tubs & tub/Shower Combo: _____ Kitchen sinks: _____ Water Heater _____

Dishwasher: _____ Washer: _____ Laundry Sinks: _____ Other _____

Fixtures if any: _____

**THIS APPLICATION IS TRUE AND COMPLETE TO THE
BEST OF MY KNOWLEDGE AND THE PROPOSED WORK
MEETS ALL CODES AND ORDINANCES OF CITY OF
NICHOLSON.**

Applicant's Signature: _____

FOR OFFICE USE ONLY: Building Inspector Approval: _____ Date _____