RESIDENTIAL GAS PIPING PERMIT APPLICATION

CITY OF GALLATIN PUBLIC UTILITIES ONLY

SUMNER COUNTY BUILDING AND CODES

Permit # _____

Date Applied ____ /_____/_____

Project Address:	Suite (if applicable):	Subdivision & Lot #:
General Contractor for Project:	Mailing Address:	Phone: Email:
Property Owner:	Mailing Address:	Phone: Email:
Mechanical Contractor:	Mailing Address::	License Number: Email:

Class of Work:
New Construction ☐ Addition ☐ Remodel ☐

System: Ounces ☐ Pounds ☐

If Pounds, List Service Size: _____

Gross Square Footage:	Total BTUs:	Total Number of Gas Appliances:	Underground? Yes ☐ No ☐

Gas Piping Layout:

Furnaces _____
Water Heaters _____
Cooking _____
Gas Logs _____
Outdoor _____
Dryers _____
Other _____

Print Name: _____ Date: _____

Signature of Owner or Owners Representative: _____

Permit Fee $ _____

INSPECTIONS

Inspection Type:	Approval:		Date:	Signature:
Rough-in/Pressure Test	Pass	Fail		
Service Release	Pass	Fail		
Final	Pass	Fail		

Furnaces ____ Water Heaters ____ Cooking ____ Gas Logs ____ Outdoor ____ Dryers ____ Other ____

This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended or abandoned for a period of 6 months at any time after work in commenced.

In the event the licensed contractor is disclosed hereon is replaced on this project, the Sumner County Building Department shall be immediately notified. Failure to notify may result in revocation of this permit and is a violation of a state law.

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 shall be in compliance whether specified herein or not. The granting of a permit does not presume to five the authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. Contractor and/or homeowner/builder is responsible to adhere to all existing setbacks, easements and/or buffer yards location on said property.

I hereby certify that I am the Owner/ Owners Representative and all official correspondence in connection with this application is to be directed to my attention using the contact information for myself in the abovementioned.

Print Name: _____ Date: _____

Signature of Owner or Owners Representative: _____