



City of Lovejoy

Plumbing Permit Application

2296 Talmadge Road, PO Box 220, Lovejoy, Georgia 30250
Phone: 770-471-2304

Residential Commercial

Minimum Fee \$200.00

Date: _____

Permit must be approved and issued by the City before job is started. Failure to comply will result in doubled fees.

Subdivision _____
 Address of Job _____
 City _____ State _____ Zip _____
 Property Owner _____
 Plumbing Contractor _____
 Address _____
 City _____ State _____ Zip _____
 Telephone () _____

Lot _____
 General Contractor _____
 Company Address _____
 City _____ State _____ Zip _____
 Telephone () _____

This is to certify that I will supervise this installation.

State Card Holder Signature _____

Print Name _____

State Card No. _____

Class I

Class II

Bus Lic No. _____ City/County _____

New Residential Construction

Heated square foot area _____ x .10 = _____
 Garbage Disposal _____ x 30.00 = _____

Commercial/Residential (Replacement/Addition) Construction

Qty	Fee	Description	Total
_____	10.50	Water Heater	_____
_____	10.50	Water Closet/Urinal	_____
_____	10.50	Sink/Basin	_____
_____	10.50	Bath Tub/Shower	_____
_____	10.50	Dishwasher	_____
_____	25.00	Disposal	_____
_____	10.50	Washing Machine	_____
_____	10.50	Laundry Tub	_____
_____	10.50	Floor Drain/Roof Drain	_____
_____	10.50	Drinking Fountain	_____

Qty	Fee	Description	Total
_____	18.00	Sump Pump	_____
_____	87.50	Sewer Ejector	_____
_____	175.00	Oil Inceptors	_____
_____	18.00	Church Baptistry	_____
_____	10.50	Inside Roof Drains	_____
_____	87.50	Outside Grease Trap	_____
_____	10.50	Water Heater 50,000 BTU	_____
_____	35.00	each add 50,000 BTU	_____
_____	10.50	Sewer	_____
_____	10.50	Other	_____

Lines

No. Ft.	Fee	Description	Total
_____	.35	Sewer Line	_____
_____	.35	Water Line	_____
_____	.35	Gas Line	_____

Processed piping/outside sprinkler

No. Ft.	Fee	Description	Total
_____	.34	First 1,000 linear foot (170.00)	_____
_____	.168	Next 4,000 linear foot (336.00)	_____
_____	.14	Next 5,000 linear foot (350.00)	_____
_____		Over 10,000 linear ft. (875.00)	_____

TOTAL PERMIT FEE \$ _____

Do not complete the following – Office Use Only		DATE: _____
Issued by: _____	Payment Amount: _____	Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order