

City of Rainbow City

APPLICATION FOR PLUMBING PERMIT

PERSON OR FIRM MAKING APPLICATION

Name Address

City State Zip

(_____) _____
Phone

Is applicant a Licensed Contractor? No ____ Yes ____ State of AL Reg. No. _____

SITE LOCATION

Owner

Address

Phone number

WORK CLASSIFIED

____ Residential ____ Commercial ____ Other

If other, explain _____

EXPLAIN WORK TO BE DONE

I HEREBY CERTIFY: That I have read this application and that all information contained herein is true and correct, that I agree to comply with all federal, state, county laws ordinances, restrictions, requirements and policies and that I am the owner or authorized to act as the owner's agent for the herein described work;

SIGNATURE _____ DATE _____