

TOWN OF SIX MILE

PLUMBING PERMIT APPLICATION

* Indicates Required Fields	
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Application must be completed prior to requesting a permit

* Owner of Building: Tenant/Business Name: * Master Building Permit #: Cost of Job (Contract Amount): * UseSingle FamilyDuplex/THMulti FamilyOffice Other * Brief Description: EquipmentOuantity Fixtures (including water heaters) Lawn Sprinkler System Cap Sewer lateral Water Line Replace / Repair Sewer Line Replace / Repair Drain/Waste/Vent Repair Sewer Tap – Residential Sewer Tap – Commercial * Contractor/Business Name (as it appears on the Town of Six Mile Business License) * Address: City: State: Zip Code: Phone : South Carolina Contractor's Licensing Board South Carolina Residential Builders Commission * State License Classification: * State License #: * Town of Six Mile Business License	* Date:				
* Master Building Permit #:Cost of Job (Contract Amount): * UseSingle FamilyDuplex/THMulti FamilyOffice - Multi FamilyOffice Brief Description: EquipmentOuantity Fixtures (including water heaters) Lawn Sprinkler System Cap Sewer lateral Water Line Replace / Repair Sewer Line Replace / Repair Drain/Waste/Vent Repair Sewer Tap – Residential Sewer Tap – Commercial * Contractor/Business Name (as it appears on the Town of Six Mile Business License) * Address: City: State: Zip Code: Phone : Email: * State License Agency (Choose One): South Carolina Contractor's Licensing Board * South Carolina Residential Builders Commission * State License Classification: * State License #: # Town of Six Mile Business License # Josen Croins application, I certify that I am authorized agent for the company performing the work stated above and that a finformation provided is found to be incorrect or falsely stated to permit will be null and void and that I may be responsible for violation of other related state laws and local ordinances.	* Job Site Address:	Tax Map #:			
* Use Single Family Duplex/TH Multi Family _Office Other	* Owner of Building:	Tenant/Business Name:			
Hotel Retail/RestaurantMedicalGarage 	* Master Building Permit #:	Cost of Jo	Cost of Job (Contract Amount):		
* Brief Description: EquipmentOuantity Fixtures (including water heaters.) Lawn Sprinkler System Cap Sewer lateral Water Line Replace / Repair Sewer Line Replace / Repair Drain/Waste/Vent Repair Drain/Waste/Vent Repair Sewer Tap – Residential Sewer Tap – Commercial * Contractor/Business Name (as it appears on the Town of Six Mile Business License) * Address: City:State:Zip Code: Phone : Email: * State License Agency (Choose One):South Carolina Contractor's Licensing Board South Carolina Residential Builders Commission * State License Classification: * State License #: * Town of Six Mile Business License By Signing this application, I certify that I am authorized agent for the company performing the work stated above and that at if any information provided is found to be incorrect or falsely stated tipermit will be null and void and that I may be responsible for violation of other related state laws and local ordinances.	Hotel	Retail/Restaurant	Multi Family Medical		
Equipment Ouantity Fixtures (including water heaters)					
Fixtures (including water heaters)	Equipment	Quantity			
Cap Sewer lateral	Fixtures (including water heaters)				
Water Line Replace / Repair	Lawn Sprinkler System				
Sewer Line Replace / Repair	Cap Sewer lateral				
Drain/Waste/Vent Repair	Water Line Replace / Repair				
Sewer Tap – Residential	Sewer Line Replace / Repair				
Sewer Tap – Commercial	Drain/Waste/Vent Repair				
* Contractor/Business Name (as it appears on the Town of Six Mile Business License) * Address: City:State:Zip Code: Phone : Email: * State License Agency (Choose One):South Carolina Contractor's Licensing Board South Carolina Residential Builders Commission * State License Classification: * State License #: * Town of Six Mile Business License By Signing this application, I certify that I am authorized agent for the company performing the work stated above and that a information provided is true. I further understand that if any information provided is found to be incorrect or falsely stated the permit will be null and void and that I may be responsible for violation of other related state laws and local ordinances.	Sewer Tap – Residential				
* Address: City:	Sewer Tap – Commercial				
City:	* Contractor/Business Name (as it appear	s on the Town of Six Mile Business	License)		
City:	* Address:				
* State License Agency (Choose One):South Carolina Contractor's Licensing BoardSouth Carolina Residential Builders Commission * State License Classification:* State License #:* Town of Six Mile Business License #:# By Signing this application, I certify that I am authorized agent for the company performing the work stated above and that a finformation provided is true. I further understand that if any information provided is found to be incorrect or falsely stated the permit will be null and void and that I may be responsible for violation of other related state laws and local ordinances.	City: Sta	ite:	Zip Code:		
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#:		South Carolina Contract			
information provided is true. I further understand that if any information provided is found to be incorrect or falsely stated the permit will be null and void and that I may be responsible for violation of other related state laws and local ordinances.	* State License Classification:			* Town of Six Mile Business License #:	
* Please Print Name Date	information provided is true. I further und permit will be null and void and that I may	lerstand that if any information pr y be responsible for violation of oth	ovided is found to be inco her related state laws and	rrect or falsely stated that this local ordinances.	
	* Please Print Name		Date:		
* Signed:	* Signed:				