

CITY OF DECATUR
PLUMBING APPLICATION

This application is intended to be a sub sheet for:

An individual job _____
Part of a General Building permit _____

CITY JOB _____

PLEASE TYPE OR PRINT

The undersigned is the owner _____ duly authorized agent _____ of the following
described real property located at:

Address _____ Zip _____

Owner's Name _____ Address _____ Zip _____

And hereby applies for a Plumbing permit for:

Single Family ___ Duplex ___ Multiple Dwelling ___ Commercial ___ Industrial ___

New _____ Renovation/Repair _____

_____ *Water Service _____ Water Piping _____ Waste & Vent System
_____ Water Heater _____ Lawn Sprinkler
_____ Other, Please list _____

All work is to be inspected before it is concealed and when it is completed.

Cost of Work: \$ _____ Name of Contact Person _____

Firm Name _____

Address _____ Zip _____ Phone _____

Method of payment: Check _____ Credit Memo _____ **E-Pay _____

*Any permit that requires issuance from City Engineering **cannot** be paid for by Credit Card at this time.

**Please provide phone number and/or email address for permit # verification:

Email _____ Phone Number (_____) _____

The above is a true and accurate description of the work and cost thereof.

Signature _____

Date _____

Credit Card payment can be made on-line at www.decaturl.gov (You must have a permit # to use E-Pay.)