



Greene County GAS PERMIT APPLICATION

BUILDING, PLANNING & ZONING
 706-453-3333
 fax 706-453-2579
 1034 Silver Dr
 Suite 103
 M-F 8am-5pm

OFFICE USE ONLY

Permit Number _____ Permit Fee _____ Date _____
 Zoning Approval _____ Final Approval _____
 Use Classification _____ Type _____ Permit File _____

OWNER INFORMATION

Owner _____ Phone _____
 Site Address _____ Fax _____
 City / State / Zip _____ Subdivision _____ Parcel No _____

CONTRACTOR INFORMATION

Contractor _____ Phone _____
 Address _____ City / State / Zip _____
 Email _____ Cell _____
 Business License _____ State Cert. No. _____ Exp. Date _____

Copy of business license and certification card (if applicable) must be provided.

Equipment :
How Many Each Line

	Number	Fee
Hot Water Heater		
Heating System		
Cooking Range		
Dryer		
Bake Oven		
Refrigerator		
Fireplace (gas line only)		
Grill		
Other		
	Sub-Total	
	Total	

BTU
 BTU

\$20 / fixture minimum \$50

Re-Inspection Fee \$100

Type of Fuel:

LP
 Natural

APPLICANT'S SIGNATURE _____ DATE _____

***The Greene County Board of Assessors, in accordance with Ga. Law must give reasonable notice to property owners prior to making a site visit. Notice is hereby given that a representative of the appraisal staff will be listing new construction from active building permits for changes and improvements which have been made to the property.