

Property Information

Property Owner: _____

Job Address: _____

Parcel Number: _____

City: _____ Zip: _____

Owner Phone Number: _____

Owner E-mail: _____

Mailing Address for Property Owner: _____

City: _____ State: _____ Zip: _____

If applicable, please provide a gate access code: _____

For existing homes: Is gas new or already existing? New installation Existing Installation

Job Information

Commercial or Residential

New or Existing

Repair Alteration Change-out

Natural Gas or Liquid Petroleum

Cost of Construction: \$ _____

Project #: _____

Scope of work:

- Single Family
- Mobile Home
- Commercial Building
- DCA Modular Building
- Pipe Only
- Condo/Apt/Multi

Natural Gas Provider

Other _____

Coker

Ameri Gas

Ridge



Contractor

Applicant: _____

Contractor State Registration#: _____

Company Name: _____

Mailing Address: _____

Phone #: _____

City: _____ State: _____

Fax #: _____

Zip: _____

Email Address: _____

Signature of Qualifier: _____

If you are an owner who would like to pull your own permit please fill out the Owner/Building Disclosure form.

Office Use

Permit # _____

Issued Date: _____

Approved By: _____

Written By: _____