

**Date:** \_\_\_\_\_ **Call Back#:** \_\_\_\_\_ **Fax Back#:** \_\_\_\_\_  
**Building Permit #: TBB** \_\_\_\_\_ **Gas Permit #: TBN** \_\_\_\_\_ **Plumbing Permit #: TBP** \_\_\_\_\_  
**Contractor:** \_\_\_\_\_ **License #:** \_\_\_\_\_  
**Job Address:** \_\_\_\_\_ **UNIT #** \_\_\_\_\_ **Cost of Improvement: \$** \_\_\_\_\_  
**Owner:** \_\_\_\_\_ **Parcel ID#:** \_\_\_\_\_

<u>A. TYPE OF IMPROVEMENT</u>	<u>C. CLASS OF BUILDING</u>	<u>(Proposed Use)</u>
02 ADDITION	01 ONE FAMILY	09 WAREHOUSE
03 ALTERATION / REPAIR	02 TWO FAMILY	15 BUSINESS
10 SWIMMING POOL	03 TRIPLEX	16 AMUSEMENT, RECREATIONAL
	04 QUADRIplex	17 CHURCH, OTHER RELIGIOUS
	05 MULTI FAMILY _____units	18 INDUSTRIAL
	06 ROOMING HOUSE _____units	19 PARKING GARAGE
	07 HOTEL, MOTEL _____units	20 SERV. STATION, REP GARAGE
	08 DORMITORY _____units	21 HOSPITAL, INSTITUTIONAL
	12 SINGLE FAMILY ATTACHED	22 OFFICE, PROFESSIONAL
	35 MOBILE HOME	24 PUBLIC UTILITY
		25 SCHOOL, LIBRARY, EDUCATION
		26 STORES, MERCANTILE
		28 DAY CARE
		30 MULTI - USE
		32 COMM ACCESSORY STRUCTURE
		37 RESTAURANTS
		____OTHER SPECIFY _____

**CERTIFICATION:** I, the above listed Contractor, acknowledge, by applying for this permit and signing below, that the **replacement appliances or devices** are installed in accordance with the manufacturer's instructions and the Florida Building Code, and have verified all connections are properly connected.

**GAS PERMIT INFORMATION**

**DRYER:** APPLIANCE STICKER No.: \_\_\_\_\_ MODEL No.: \_\_\_\_\_ BTUs: \_\_\_\_\_  
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**GAS LOGS:** APPLIANCE STICKER No.: \_\_\_\_\_ MODEL No.: \_\_\_\_\_ BTUs: \_\_\_\_\_  
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**PATIO GRILL:** APPLIANCE STICKER No.: \_\_\_\_\_ MODEL No.: \_\_\_\_\_ BTUs: \_\_\_\_\_  
**PATIO GRILL:** APPLIANCE STICKER No.: \_\_\_\_\_ MODEL No.: \_\_\_\_\_ BTUs: \_\_\_\_\_  
**RANGE:** APPLIANCE STICKER No.: \_\_\_\_\_ MODEL No.: \_\_\_\_\_ BTUs: \_\_\_\_\_  
**RANGE:** APPLIANCE STICKER No.: \_\_\_\_\_ MODEL No.: \_\_\_\_\_ BTUs: \_\_\_\_\_  
**WATER HEATER:** APPLIANCE STICKER No.: \_\_\_\_\_ No. of GALLONS: \_\_\_\_\_ MODEL No.: \_\_\_\_\_ BTUs: \_\_\_\_\_  
60g or less  
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60g or less  
**OTHER:** \_\_\_\_\_ APPLIANCE STICKER No.: \_\_\_\_\_ MISC INFO: \_\_\_\_\_

**PLUMBING PERMIT INFORMATION**

**BACKFLOW PREVENTER REPLACEMENT:** APPLIANCE STICKER No.: \_\_\_\_\_ BACKFLOW PREVENTER SIZE: \_\_\_\_\_  
2" or less  
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**WATER HEATER:** APPLIANCE STICKER No.: \_\_\_\_\_ No. of GALLONS: \_\_\_\_\_ MODEL No.: \_\_\_\_\_  
60g or less  
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60g or less  
**OTHER:** \_\_\_\_\_ APPLIANCE STICKER No.: \_\_\_\_\_ MISC INFO: \_\_\_\_\_

**NOTE:** By applying for this permit and signing below, I understand that I may be contacted by the City of Tallahassee Inspector, to schedule an inspection for the permitted appliance(s), to assure compliance of the code has been met.

**Contractors Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_