



NEWTON COUNTY DEPARTMENT OF DEVELOPMENT SERVICES

APPLICATION FOR TRADES PERMIT

PLUMBING

ELECTRICAL

HVAC

GAS

PROPERTY ADDRESS: \_\_\_\_\_ RENTAL PROPERTY \_\_\_\_\_

UTILITY PROVIDER: \_\_\_\_\_

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ELECTRICAL: Residential  Well Service  Service Change  Commercial  Three Phase  Other

0 – 200 AMP  201 – 400 AMP  Over 400 AMP

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PLUMBING: Commodes \_\_\_\_\_ Washing Machine \_\_\_\_\_ Drinking Fountains \_\_\_\_\_ Sewer \_\_\_\_\_

Lavatory \_\_\_\_\_ Dish Washer \_\_\_\_\_ Service Sinks \_\_\_\_\_ Other \_\_\_\_\_

Bath Tubs \_\_\_\_\_ Water Heater \_\_\_\_\_ Soda Fountains \_\_\_\_\_

Kitchen Sinks \_\_\_\_\_ Floor Drains \_\_\_\_\_ Disposals \_\_\_\_\_

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HVAC: New  Repair  Alteration  Total heated/cooled area: \_\_\_\_\_ sq ft

GAS: New  Repair  Alteration

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Applicant/Contractor Information (State License and business license must be provided)

Homeowner/Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

State License Number \_\_\_\_\_ Business License Number \_\_\_\_\_

I hereby certify my company/myself is doing the job listed and I am the holder of a state license and current business license in the county where the business is based.

\_\_\_\_\_  
Contractor's Signature

I hereby certify I am the property owner and live at the above address and am doing all of the work listed.

\_\_\_\_\_  
Homeowner's Signature