

## GAS FIRED EQUIPMENT PERMIT APPLICATION

## **CITY OF COLUMBIA PLANNING & DEVELOPMENT SERVICES**

Development Center • 1136 Washington Street, Columbia, SC 29201 • 803.545.3420 • Fax: 803.733.8699

DATE				SC LICENS	E#		
COC Qualification Card #				Card Holde	r Name		
General Contractor Name				Master Perr	nit #		
JOB LOCATION				OCCUPIED	ВҮ		
I, as a property owner or owner representative, confirm to the best of my knowledge that the above property is is not within a flood hazard area  SIGNATURE: RELATIONSHIP:							
	NAME:						
CONTRACTOR INFORMATION	ADDRES	S:					
in on in the	TEL:		F	AX:	E	E-Mail	
Work will be done in a building: Being Constructed Remodeled Existing							
Replacing primary service: Yes No							
DESCRIPTION OF WORK							
# Meters Existing:				# Meters Added:			
Fixture Type		#	of Fixtures	BTU/HR. Deman		ı	Fee
Domestic Gas Range							
Water Heater G	al.						
Furnace							
Boiler							
Other							
JOB VALUE Equipment + Installation				COMPLETION DATE		E	
It is understood and agreed by the undersigned that the approval of this application does not constitute a privilege to violate the Building Code, Zoning Ordinance or other Ordinances of the City of Columbia, and that any omission of or misrepresentation of fact with or without intention of the undersigned, or any alteration or change from this application without approval of the Building Official shall constitute sufficient grounds for the revocation of any permit issued which was based on the approval of this application.							
SIGNATURE							
FOR STAFF USE TMS#					ZONING DISTRICT		
ZONING REVIEW App		oved	Denied	DAT	E		