



Mailing : 300 South Adams St., B-28
Tallahassee, Florida 32301

APPLIANCE STICKER PURCHASE APPLICATION

www.talgov.com

APPLICANT SERVICES
(850) 891-7125
FAX: 891-0948
BUILDING INSPECTION
(850) 891-7050
FAX: 891-7099

Location: 435 N Macomb St.
Tallahassee, Florida 32301

Date: _____

TMA _____

Contractor: _____

License #: _____

I, the above listed Contractor, by purchase of Appliance Stickers, I am acknowledging that installation of an appliance will be installed in accordance with the manufacturer's instructions. The appliances being replaced are limited to those appliances approved through Growth Management Policy 318GM and my employee doing the replacement has taken the Appliance Sticker Program training.

Appliance Stickers are sold in Packages of 10.

_____	X	\$ 70.00 each		\$ _____
(# of Packages)		\$ 2.50 each (surcharge)	+	\$ _____

State	Surcharges:	+	\$ _____
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TOTAL DUE = \$ _____

STAFF USE ONLY

APPLIANCE STICKER NUMBER RANGE: _____ - _____

Applicant Signature: _____

Date: _____