



APPLIANCE STICKER CERTIFICATE PERMIT APPLICATION

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

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

www.talgov.com

Location: 435 N Macomb St. Tallahassee, Florida 32301

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

Table with 3 columns: A. TYPE OF IMPROVEMENT, B. OWNERSHIP, C. CLASS OF BUILDING (Proposed Use). Lists various building types and ownership categories.

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

Form for Gas Permit Information with fields for Dryer, Gas Logs, Patio Grill, Range, Water Heater, and Other, including Appliance Sticker No., Model No., and BTUs.

PLUMBING PERMIT INFORMATION

Form for Plumbing Permit Information with fields for Backflow Preventer Replacement and Water Heater, including Appliance Sticker No., Model No., and BTUs.

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.

Applicant Signature: Date: