

GAS PERMIT APPLICATION
DARLINGTON COUNTY BUILDING / CODES ENFORCEMENT
PHONE 843-398-4011 FAX 843-398-4072

OWNER: _____ DATE: _____

OCCUPIED BY: _____

E911 ADDRESS: _____

TAX MAP # _____

NATURE OF WORK:

- | | |
|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> NEW | <input type="checkbox"/> ALTERATION |
| <input type="checkbox"/> ADDITION | <input type="checkbox"/> REPAIRS |
| <input type="checkbox"/> EXTEND | <input type="checkbox"/> INSTALL |

TYPE OF FUEL:

- NATURAL GAS
 LPG

TOTAL INSTALLATION COST: \$ _____

 CONTRACTOR OWNER PHONE NUMBER

ADDRESS

SIGNATURE S.C. STATE LICENSE #

APPROVED DENIED APPROVED BY: _____