TOWN OF EAGLEVILLE, TENNESSEE
P.O. 80x 68
Eagleville, TN 37060 615-274-2922 · Fax 615-274-2977 www.eaglevilletn.com

## **GAS PERMIT APPLICATION**

Job Address:			***************************************
Applicant Name:		PARTITION AND ADMINISTRATION OF THE PARTITION OF THE PART	
Applicant is the:	[ ] Contractor* License Number:		[] Homeowner**
	ense with the City of Murfreesbo neowner, he/she must read and s	ro or State of Tennessee is required. sign a Homeowner Affidavit.	
Project Information:	[] Existing Commercial [] Existing Residential		*******
	[ ] New Commercial	[] New Residential	
Property Owner:			
Address:			***************************************
City, State, Zip	***	Phone:	- VAN WARRAN, STAR
Indicate number of fix	ktures (each)		
Water Heater			
Gas Logs		•	
Dishwasher			
Stove			
Oven			
Outdoor Applia	nce		
Fire Pit			
Furnace			
Boiler			
Generator			
Other (Please S	pecify)	Total Fixtures	:
Applicant Signature: _		Date:	
Approval Signature: _		Date:	
Fee \$40 (plus \$6.50/fi	xture) Total Fee	Paid:	