



Barnwell County



Mechanical Permit

B/P # _____

Map No. _____

Job Address: _____

Owner: _____

Contract # _____

Contractor: _____

Contract # _____

Install New Unit

Other

Ready for Inspection

Will Call When Ready

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

Notice: I hereby certify that I have read and completed this permit application and all information is accurate and true. I hereby certify that I am authorized by the above listed owner to make application for and to obtain a building permit for the County of Barnwell. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other federal, state or local law regulating construction or the performance of construction.

Signature of Agent _____ Date _____

Signature of Owner _____ Date _____