

APPLICATION FOR PLUMBING AND OR GAS PERMIT  
CITY OF LAUREL, P.O. BOX 647 LAUREL, MS 39441-0043  
(601) 426-0017 OR FAX (601) 426-0043

CONTRACTOR \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

PROJECT LOCATION \_\_\_\_\_

PROJECT OWNER \_\_\_\_\_

OWNERS PHONE \_\_\_\_\_

DESCRIBE WORK

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TOTAL JOB COST \_\_\_\_\_

APPROVED

DATE

CALL (601) 426-0017 FOR ALL INSPECTIONS