

CITY OF EARLY
960 EARLY BLVD.
PHONE: (325) 643-5451
FAX: (325) 643-5452



BUILDING INSPECTIONS
PO BOX 3100
EARLY, TEXAS 76803
www.earlytx.net

APPLICATION FOR PLUMBING PERMIT

CONTRACTOR INFORMATION

APPLICANT NAME:	EMAIL ADDRESS:	
COMPANY:		
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE:	CELL:	FAX:

CONSTRUCTION LOCATION:

PROPERTY OWNER: _____ PHONE: _____

STREET ADDRESS: _____

MASTER PLUMBER NAME: _____

STATE LICENSE NUMBER: M- _____ EXP. DATE _____

CERTIFICATE OF INSURANCE: # _____ EXP. DATE _____

PURPOSE OF PLUMBING PERMIT: New Construction _____ Repair _____ Upgrade _____

Description of Work: _____

SIGNATURE: _____ PRINT NAME: _____

Permit fee: \$50 per inspection

For City Use Only

RECEIVED BY: _____ DATE: _____ DATE ISSUED: _____
PERMIT NO. _____