Town of Nolensville
Sprinkler Permit Application

Permit No: _____

Codes Department: 776-6686   776-3634 *(fax)*

Application must be filled out completely, or permit will be denied

Applicant Name	Phone Numbers

Applicant is: ☐ Builder/Contractor   ☐ Owner   ☐ Other *(explain)*

Name Owner/Contractor	Contractor License No. (copy attached)

Address of Owner/Contractor	Email Address

Job Address	Lot Number

Plat/Map#	Page/parcel #	Zoning	Subdivision

Type of Work: ☐ Residential   ☐ Commercial   **Attached:** ☐ Worker's Comp Insurance   ☐ Copy of Contractor's License

Description of Work:
☐ New System   ☐ Addition to System   ☐ Repair to Existing System
☐ Alteration to Existing System   ☐ Hydraulic Calculations

Number of Sprinkler Heads _____   Construction Value Estimate: $ _____

Permit Fee Calculation:

Total Permit Fee: $ 100.00

NOTICE:

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.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction of the performance of construction.

I hereby certify that the information given is true and correct.

_____   _____
Signature of Applicant   Date

Total Fees	Date Paid	Check No.	Staff

P.O. Box 547 • 7218 Nolensville Rd. • Nolensville, Tennessee 37135 • (615) 776-3633 • Fax: (615) 776-3634

Rev 02/21/14