



Escambia County Building Inspections Division
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 Email buildinginspections@myescambia.com
 On the Web: www.myescambia.com

GAS PERMIT FEE ESTIMATE

PROJECT NAME:									
LOCATION:									
Type of Building of Structure:				<input type="checkbox"/> Existing <input type="checkbox"/> New <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Change Out <input type="checkbox"/> New Installation					
Type of Service:									
Cost of Construction:(Labor & Materials)				\$					
FIXTURES	# of FIXTURES	# of Outlets (Piping)	Vented		FIXTURES	# of FIXTURES	# of Outlets (Piping)	Vented	
Boiler					Radiant Heater				
Central Furnace					Range				
Cook Top					Water Heater				
Deep Fryer					Other (Specify)				
Fireplace					Conversion				
Floor Furnace					LP Tank/Cylinder(s)				
Gas Light/Log					Pressure Test				
Generator					Meter Loop - House				
Grill (Counter)					Meter Loop - Mobile Home				
Grill (Outdoor)					Repair and/or Test Lines				
Oven (Wall)					Check One	Natural Gas	<input type="checkbox"/>	LP Gas	<input type="checkbox"/>
Pool/Spa Heater									

This Is Not A Permit Application

I HEREBY REQUEST A QUOTE OF ALL FEES ASSOCIATED WITH THIS PROPOSED GAS PROJECT. I UNDERSTAND THAT THESE FEES ARE ESCAMBIA COUNTY BUILDING INSPECTIONS DEPARTMENT FEES. FEES THAT COULD BE CHARGED BY ANOTHER AGENCY ARE NOT INCLUDED. I FURTHER UNDERSTAND THAT THE FINAL EXACT COSTS WILL BE DETERMINED AT COMPLETION OF THE PERMIT APPLICATION PROCESS.

Signature:		Title:	
Printed Name:			
Company			
Telephone No.:		Cell No.:	
Fax No.:			
	Estimated Gas Permit Fees: \$		

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