

**GREENE COUNTY DEPARTMENT OF BUILDING REGULATION  
RESIDENTIAL GAS LINE PERMIT/LICENSE APPLICATION FORM**

PERMIT# \_\_\_\_\_

667 DAYTON-XENIA ROAD, XENIA, OHIO 45385 (937) 562-7420; FAX (937) 562-7425; Web: www.co.greene.oh.us

(1) PROJECT NAME/OWNER: \_\_\_\_\_ (2) GAS LINE CONTRACTOR: \_\_\_\_\_  
PROJECT ADDRESS: \_\_\_\_\_ NAME: \_\_\_\_\_  
PLAT: \_\_\_\_\_ LOT #: \_\_\_\_\_ ADDRESS \_\_\_\_\_  
TOWNSHIP/CITY: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX # \_\_\_\_\_

**E -MAIL: \_\_\_\_\_  
(To receive inspection times & inspection results,  
you must have email address in order to receive)**

(3) TYPE OF INSTALLATION: NEW \_\_\_\_\_ REPLACEMENT \_\_\_\_\_ EXTENSION \_\_\_\_\_

(4) CONSTRUCTION: SLAB \_\_\_\_\_ CRAWL \_\_\_\_\_ BASEMENT \_\_\_\_\_ ROOF TOP \_\_\_\_\_ OTHER \_\_\_\_\_

(5) FUEL: NATURAL GAS \_\_\_\_\_ LPG \_\_\_\_\_ OTHER \_\_\_\_\_

(6) QUANTITY OF APPLIANCES SUPPLIED BY GAS: WATER HEATER \_\_\_\_\_ FURNACE \_\_\_\_\_ STOVE \_\_\_\_\_  
DRYER \_\_\_\_\_ FIREPLACE \_\_\_\_\_ GENERATOR \_\_\_\_\_ OTHER \_\_\_\_\_

(7) BASIC FEE: ..... \$30.00 ..... **\$30.00**

(8) RESIDENTIAL NATURAL GAS ..... \$33.67 ..... ( Inside \_\_\_\_\_ Underground \_\_\_\_\_ )

**\*\* Please fill in the following: \*\***

(9) RESIDENTIAL GAS LINE (**RECONNECT**)....\$14.00 ..... **Gas Line Size:** \_\_\_\_\_

**Gas Line Length:** \_\_\_\_\_

(10) RESIDENTIAL PROPANE TANK ..... \$12.00 ..... **Gas Line Material:** \_\_\_\_\_

**Gas Pressure @ Regulator:** \_\_\_\_\_

(11) RESIDENTIAL PROPANE PIPING ..... \$12.00 ..... **Total Equip. BTU:** \_\_\_\_\_

(12) ISOMETRIC DRAWING   
OR SEE ATTACHED:

Owner/Contractor is responsible for the design, performance and installation of the Gas system.

**TOTAL: \$ \_\_\_\_\_ ADD 1% STATE FEE ON RESIDENTIAL JOBS**

PLANS AND CALCULATIONS MAY BE REQUIRED FOR APPROVAL AND SHALL BECOME A PART OF THIS APPLICATION AND PERMIT/LICENSE RECORD.

**Attention:** Work covered by this permit requires installation of a Carbon Monoxide (CO) detector. The CO detector shall be verified by the building inspector at the time of inspection.

\_\_\_\_\_  
SIGNATURE OF APPLICANT / DATE

\_\_\_\_\_  
PLAN REVIEW BY:

\_\_\_\_\_  
DATE

**A COPY OF THIS PLAN APPROVAL SHALL REMAIN ON SITE FOR INSPECTION**

**January 1, 2015**