

Trade Permit

ELECTRICAL, PLUMBING & MECHANICAL PERMIT APPLICATION	Permit No. _____
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Type of Work:	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Install <input type="checkbox"/> Repair <input type="checkbox"/> Replace	Application Date ____/____/____	Estimated Value of Work (Labor and Materials): \$ _____
Applicant Name: _____		Phone: _____	Email: _____

PROJECT INFORMATION

Job Site Address: _____	Subdivision: _____ Lot Number: _____			
Property Owner Information: _____				
Name	City	State	Zip Code	Phone
Existing Building? <input type="checkbox"/> Yes <input type="checkbox"/> No	Building Permit #: _____			
Use: <input type="checkbox"/> Commercial <input type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family	Number of Units: _____			
Scope of Work: _____ _____				

CONTRACTOR INFORMATION

Business Name: _____	State Certification Number: _____				
Street Address	City	State	Zip Code	Phone	Fax
Occupational Tax Number: _____				City/County held: _____	

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 or the performance of construction.

Signature of Contractor (State Certification number)

Date

Print name of Contractor

email address

Applicant MUST attach a copy of

- Driver's License,
- State Certification Card, and
- Business License (Occupation Tax License)

FOR OFFICE USE ONLY	Application Accepted by: _____	
Administrative Fee: \$ _____	Permit Fee: \$ _____	TOTAL FEE: \$ _____

STATE OF GEORGIA
TOWN OF TYRONE

CONTRACTOR AFFIDAVIT

COMES NOW _____,
(Contractor's name)

who, after being sworn by the undersigned officer duly authorized by law to administer oaths, states the following:

I, _____, d/b/a
(Contractor's name)

_____ hereby certify that I,
(Business Name)

or persons working under my license number _____, have
(State License Number)

performed all the electrical / plumbing / HVAC work at property known as
(Circle applicable type work)

_____ ; under permit number
(Address of job site)

(Permit Number)

The foregoing is true and correct to the best of my knowledge and belief.

(Signature of Contractor)

Sworn to and subscribed before me this
_____ day of _____, _____.

Notary Public

My Commission Expires: _____