



**Building Department**  
 134 S Oak Street  
 Jackson, GA 30233  
 770-775-7535

# Trade Permit Application

- Electrical**
- Mechanical**
- Plumbing / Gas**

**PERMIT** \_\_\_\_\_  
**ESTIMATED VALUE (Labor and Materials):** \$ \_\_\_\_\_  
**PERMIT FOR POWER RESTORATION** \_\_\_\_\_ Y \_\_\_\_\_ N  
**IF AFFIDAVIT ONLY, BUILDING PERMIT** \_\_\_\_\_

**JOB SITE ADDRESS:** \_\_\_\_\_ **SUBDIVISION/PROJECT NAME:** \_\_\_\_\_ **LOT/SUITE #:** \_\_\_\_\_

**STAND ALONE?** \_\_\_ Y \_\_\_ N **IF NO – GC COMPANY NAME:** \_\_\_\_\_

Job Description:  
 \_\_\_\_\_  
 \_\_\_\_\_

**Property Owner**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Trade Contractor**  
 Business Name: \_\_\_\_\_  
 Email: \_\_\_\_\_ License: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

<b># of Plumbing Fixtures:</b> _____ <b># of HVAC Units:</b> _____ <b># of Service Amps:</b> _____	<b>CONTACT PERSON</b> <i>If permit is for power restoration</i>
	<b>NOTES FOR INSPECTOR</b> <i>Example: Lock box code, hidden key, etc.</i>

*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 started. Separate permits are required for electrical, plumbing, and mechanical work.*

*I hereby certify that I have read and examined this application and the information provided herein is true and correct. No changes shall be made from that which is stated in this application, or in attached plans and specifications. Granting of a permit shall not be construed as a permit for or an approval of any violation of the Building Code or any other state or local law regulating construction or the performance of construction. I further certify that all construction will comply with all adopted codes, ordinances, and that there may be a fee associated with obtaining a permit.*

Signature of Licensed Cardholder: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY** Application Accepted by: \_\_\_\_\_

Notes:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
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Administrative Fee: \$ _____	Permit Fee: \$ _____	Total Fee: \$ _____	<b>DATE OF SUBMITTAL</b> ____ / ____ / ____
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