



BUILDING DEPARTMENT 134 S  
OAK STREET  
770-775-7535  
INSPECTION REQUEST FORM

**PLEASE FILL OUT ALL FIELDS AND CLICK SUBMIT IN ORDER TO HAVE INSPECTION PERFORMED**

**JOBSITE ADDRESS:** \_\_\_\_\_ **CONTACT INFO:** \_\_\_\_\_

**PERMIT(S):** \_\_\_\_\_ **ADDITIONAL CONTACT INFO:** \_\_\_\_\_

**INSPECTION REQUESTED FOR:** \_\_\_\_\_ *Inspections scheduled before 4pm will be scheduled for the following business day excluding city approved holidays.*

**INSPECTION REQUESTED:**

**ADDITIONAL NOTES FOR INSPECTOR:**

*Please note that any specific times requested for inspections are not guaranteed. We will do our best to accommodate these requests, but cannot guarantee actual inspection times. If you would like a call from the inspector beforehand, please make a note of it here.*

PLEASE CLICK SUBMIT ONCE FORM IS  
COMPLETELY FILLED OUT.