



5047 Union Street
Union City, GA 30291
Phone: 770-515-7950
Email: Development@unioncityga.org

Building Permit Application

Type of Work:	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration	Application Date	Estimated Value of Work (Labor and Materials): \$
Site Built Building <input type="checkbox"/> Industrialized Building <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Log Building <input type="checkbox"/> Other <input type="checkbox"/>			
Construction Type: IA <input type="checkbox"/> IB <input type="checkbox"/> IIA <input type="checkbox"/> IIB <input type="checkbox"/> IIIA <input type="checkbox"/> IIIB <input type="checkbox"/> IVA <input type="checkbox"/> IVB <input type="checkbox"/> VA <input type="checkbox"/> VB <input type="checkbox"/>			
Occupancy: A1 <input type="checkbox"/> A2 <input type="checkbox"/> A3 <input type="checkbox"/> A4 <input type="checkbox"/> A5 <input type="checkbox"/> B <input type="checkbox"/> E <input type="checkbox"/> F1 <input type="checkbox"/> F2 <input type="checkbox"/> H1 <input type="checkbox"/> H2 <input type="checkbox"/> H3 <input type="checkbox"/> H4 <input type="checkbox"/> H5 <input type="checkbox"/> I1 <input type="checkbox"/> I2 <input type="checkbox"/> I3 <input type="checkbox"/> I4 <input type="checkbox"/> M <input type="checkbox"/> R1 <input type="checkbox"/> R2 <input type="checkbox"/> R3 <input type="checkbox"/> R4 <input type="checkbox"/> S1 <input type="checkbox"/> S2 <input type="checkbox"/> U <input type="checkbox"/>			
Permitted Area Square Foot:	Heated Square Foot:	Unheated Square Foot:	Total Square Foot:
Applicant Name:		Phone:	Email:

PROJECT INFORMATION

Project Name:

Job Site Address:		Subdivision: _____ Lot Number: _____	
Property Owner Information: Name: _____ Phone # _____			
Address		City	State Zip Code
Scope of Work: _____ _____			
Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Finished Basement <input type="checkbox"/> Siding <input type="checkbox"/> Deck <input type="checkbox"/> Carport <input type="checkbox"/> Pool <input type="checkbox"/> <input type="checkbox"/> Sign <input type="checkbox"/> Storage Building <input type="checkbox"/> Interior Alteration <input type="checkbox"/> Exterior Alteration <input type="checkbox"/> Windows <input type="checkbox"/> Pool Fence <input type="checkbox"/>			
Scope of work includes: Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/>			
# of Bedrooms:		# of Dwelling units:	# of Stories: Electricity Provider:
Exterior Finish Material:		Building Height:	

CONTRACTOR INFORMATION

Business Name:		State Certification Number:	
Street Address			
City	State	Zip Code	Phone
Print name of Contractor			
Email address			

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 thereof.

Signature of Contractor & (State Certification number)

Date

FOR OFFICE USE ONLY		Application Accepted by: _____		Date: _____
Adjusted Construction Cost per ICC building valuation Data \$				
WASA Approval		Date	Bond : \$	Date
Plan Review Fee: \$	Permit Fee: \$		Fire Marshal Fee: \$	
LDP Permit: \$	CO Fee: \$		Total Permit Fee: \$	