



Building Permit and/or Approval/Occupancy Inspection Application

CITY USE ONLY		Permit #: _____
Plan Review#:	Review Fee:\$ _____	Ref. Permit #: _____
		Permit Fee:\$ _____

This application is made in accordance with the laws and ordinances of the City of Lilburn. The Building Permit issued is granted for the erection, alteration and use of a structure as described herein, according to the plans or specifications submitted and is to be located on the property as shown on the accompanying plat.

<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential PERMIT INFORMATION (Check all that apply)			
<input type="checkbox"/> Building/Trade Permit		<input type="checkbox"/> Utility (Power/Gas) Connect	
<input type="checkbox"/> Demolition*		<input type="checkbox"/> Bldg Addition	
<input type="checkbox"/> New Business/Name/Owner		<input type="checkbox"/> Alteration/Renovation	
<input type="checkbox"/> Certificate of Occupancy		<input type="checkbox"/> Certificate of Approval	
Street Address/Suite			
Name of Development		Subdivision	Block Lot
District	Land Lot	Parcel	Zoning
6			
Details of New Business:			
Details of Construction (attach plans as needed):			
Power Co.:		New Construction (List square footage of each)	
Water Meter #:		<input type="checkbox"/> Heated Area _____ Garage Area _____	
		<input type="checkbox"/> Unfinished Basement _____ <input type="checkbox"/> Utility: (Patio/Porch _____ <input type="checkbox"/>	
Setback from Property Lines:		Addition/Renovation	
Front	Rear	Left Side	Right Side
Total Construction Cost: \$		Number of:	
<input type="checkbox"/> M.E.P cost Included		Rooms	Bedrooms Baths
Building Dimensions: _____ X _____		Stories	Dwelling Units
Total Square Footage:		Multifamily Number of Units:	
		1 BR	2 BR 3 BR
*Requires Demolition Inspection Application.		All waste to be disposed of through Advanced www.advanceddisposal.com	
PROPERTY OWNER		<input type="checkbox"/> TENANT/BUSINESS OWNER or <input type="checkbox"/> CONTRACTOR**	
Business Name		Business Name	
Street, Suite		Street, Suite	
City, State, Zip		City, State, Zip	
Owner Name (print)		Contact Name (print)	
Other Contact (ie Prop Mgr):			
Phone:		Phone:	
Email:		Email:	
** Attach copy of Contractor Business License, State License if applicable, photo ID, and proof of \$100,000 Property Damage Liability Insurance. ** General Contractors are responsible for verifying Business License, State License and Liability Insurance of all Subcontractors.			

Under signer upon oath states that the above information is true and correct, understands that the Permit issued is only for construction as stated, and that occupancy of the structure is not permissible until all requirements are met and a Certificate of Occupancy has been issued by the City of Lilburn.

Expediter (With Permit authorization) Contractor Owner

Applicant's Signature: _____ Print Name: _____ Date: _____