

CITY USE ONLY

Permit #: _____

Plan Review#: _____ Review Fee:\$ _____ Ref. Permit #: _____ Permit Fee:\$ _____ Pd by/ck#: _____



Building Permit and/or Approval/Occupancy Inspection Application

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.

PERMIT INFORMATION (Check all that apply)			
<input type="checkbox"/> Building/Trade Permit	<input type="checkbox"/> Utility (Power/Gas) Connect	<input type="checkbox"/> New Business/Name/Owner	<input type="checkbox"/> Certificate of Occupancy
<input type="checkbox"/> Demolition*	<input type="checkbox"/> Bldg Addition	<input type="checkbox"/> Alteration/Renovation	<input type="checkbox"/> Certificate of Approval
Street Address/Suite			
Name of Development		Subdivision	Lot Block
District 6	Land Lot	Parcel	Zoning
		<input type="checkbox"/> Sanitary Sewer	<input type="checkbox"/> Septic Tank
Details of New Business:			
Details of Construction:			
Power Co.:	Water Meter #:	New Construction (attach plan/plat showing square footage of each)	
		<input type="checkbox"/> Heated Area	<input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Garage Area
Setback from Property Lines:		Addition/Renovation	
Front	Rear	Left Side	Right Side
		<input type="checkbox"/> Sunroom	<input type="checkbox"/> Garage <input type="checkbox"/> Basement Finish <input type="checkbox"/> Other
Estimated Construction Cost: \$		Number of:	
		Rooms	Bedrooms Baths
Building Dimensions: _____ X _____		Stories	Dwelling Units
Total Square Footage:		Duplex/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.			

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.

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

Issuing Clerk's Signature: _____ Permit Approval Date: _____ (subject to expiration)