



400 East Main Street
 Hogansville, GA 30230
 Phone: 706-637-8629
 Fax: 706-637-4813
 Email:

Permit #:

TRADE PERMIT APPLICATION

Site Address:	Suite:	Zip:
<input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical <input type="checkbox"/> Low Voltage (except fire alarm)	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
<input type="checkbox"/> Stand-Alone Trade Permit <input type="checkbox"/> Work Related to Permit #:		

PROPERTY

Parcel # _____	Commercial Tenant (if known):		
Property Owner of Record:		Phone:	
Address:		Suite #:	
City:	State:	Zip:	

TRADE CONTRACTOR

Company Name:		Phone:	
Contact:		E-Mail:	
Address:		Suite #:	
City:	State:	Zip:	
Trade License Holder:		Business License #:	
Trade License #:	Expires:	<i>Attach copies of trade license, business license, and trade license holder's photo ID</i>	

APPLICANT

Applicant is: <input type="checkbox"/> Trade Contractor (see above) <input type="checkbox"/> Property Owner (see above)		<input type="checkbox"/> Authorized Permit Agent <i>(complete this section and attach notarized Authorized Permit Agent form with copy of permit agent's photo ID)</i>	
Applicant:		Phone:	
Company Name:		E-Mail:	
Address:		Suite #:	
City:	State:	Zip:	

WORK INFORMATION

Describe Work to be Performed:		Est. Value of Work (Labor and Materials):	Permit Fee:
Type of Project: <input type="checkbox"/> New construction/addition <input type="checkbox"/> Alteration <input type="checkbox"/> Accessory structure <input type="checkbox"/> Roadside Equipment	Type of Work: <input type="checkbox"/> Replace existing equipment/system <input type="checkbox"/> Install, alter or expand equipment/system <input type="checkbox"/> Repair equipment/system	<input type="checkbox"/> Inspection for meter release <input type="checkbox"/> T-Pole/temporary power <input type="checkbox"/> Cell Tower	

CERTIFICATION

I 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 state or local law regarding construction or the performance of construction. I understand that I am responsible for obtaining all required inspections. The work must begin and the first inspection passed no more than 180 days from the issue date of the permit or the permit is EXPIRED. All required plans, specifications, contractor state licensure, and business licenses must be submitted with the completed application. If any information is found to be false or misrepresented, the permit will be deemed invalid. I agree to indemnify and hold harmless the City of Hogansville from all damages, demands, or expenses of every character which may in any manner be caused by the work permitted.

Trade License Holder's Signature: _____ Date: _____

Copy of current State trade license, driver's license, and business license (Occupational Tax Certificate) MUST be submitted with application.