

100 South Church St. Dublin, GA 31021

478-277-5070

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CONTRACTOR PERMIT APPLICATION

Commercial	Residential		
Project Site Name			
Project Site Address			
Work Responsible Party:			
Property Owner	Authorized Agent	Contractor	
Name:			
Phone:			
Email:			
Work to Include:			
Electrical	Low Volta	Low Voltage	
Plumbing	Gas	Gas	
Mechanical/HVAC	Sprinkler	Sprinkler/Fire Alarm	
VALUATION OF LABOR AND MAT	ΓERIALS (all permit fees to be verif	ried by Inspection Department)	
Building	Plumbing	Plumbing	
Electrical	Gas	Gas	
Mechanical/HVAC	Low Volta	Low Voltage	

Coordin Lineary of Subscenting to a supplier on marinet.
Georgia Licensed Subcontractor working on project:
Electrical:
Phone #:
Plumbing:
Phone #:
Mechanical / HVAC:
Phone #:
Low Voltage:
Phone #:
Applicant Certification:
I hereby certify that I have answered all questions contained herein and know the same to be true and correct. All work performed under this permit must comply with the State Law and local ordinances. Further, I understand that any permit issued, based upon false information or misinterpretation provided by the applicant, will be null and void and subject to the penalty as provided by law and ordinance.
All work requiring a permit must be totally exposed for the inspection purposes and authorized officials of City of Dublin to enter premises for each inspection required. Double permit fees shall be charged if work has been started before a permit is issued. All permits will need an approved final inspection of all trades before the job is rendered complete.
Date:
Signature of Applicant:
Printed Name of Applicant: