

BUILDING PERMIT

City of Dahlonega
465 Riley Road
Dahlonega, GA 30533
706/864-6133 Fax: 706/864-4837



Date Issued: _____

Permit #: _____

Use: _____

Classification: _____

MAP REF: _____

ACREAGE: _____

ZONE: _____

OWNER
NAME: _____

ADDRESS: _____

CITY/ST/ZIP: _____

PHONE #: _____

LOCATION: _____

PURCHASED FROM: _____ DATE: _____

CONTRACTOR: _____ CONT. PHONE: _____

Units: _____ Const. Type: _____ Sq.Ft.: _____ Sq. Ft. basement
area not finished: _____

Finished sq. ft. Other: Attic,
basement area: _____ porch, garage: _____ Heat/Air: _____ # Bedrooms: _____

Baths: _____ Fireplace: _____ Est. Value: _____

*****Affidavits from mechanical, electrical, plumbing and low voltage contractors must be submitted.
Forms are available at the Planning Office. A Porta-john is required to be on site.**

NOTES:

If tap requires a bore under the road there may be an additional charge.

Sewer Tap Fee: _____
Water Tap Fee: _____
Grinder Pump Fee: _____
Building permit Fee: _____

Water billing will start from day meter is installed.
Water and sewer tap fees or grinder pump fees are non refundable and will expire if not installed within 24 months.

This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction/work is suspended or abandoned for a period of 6 months after work is started. No refund of permit fees will be given after 6 months or after construction has started.

I hereby certify that I have read and examined this document 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. Granting of a permit does not presume to give authority to violated or cancel the provisions of any other state or local law regulating construction or the performance of construction.

If Applicable "This permit is authorized pursuant to and dependent on compliance with a Certificate of Appropriateness (COA) dated _____. Departure of material or methods from the requirements of the COA may subject the property to enforcement action by the City as violations of the Building Code. Improper or illegal work may be subject to stop work order, fine(s), and non-issuance of a Certificate of Occupancy. Any questions regarding this conditional approval should be directed to Chris Head, Planning Director, 706-864-6133.

(Signature of Contractor or Authorized Agent)

Date

To schedule an inspection call City Hall at 706/864-6133 one day before inspection is needed. Addresses are issued by 911 Addressing located at County Planning, 25 Short Street. 706-864-6894. Once your driveway is installed give them a copy of building permit and they will assign an address.

****Notice from Lumpkin County Assessor's Office: In accordance with O.C.G.A 48-5-264 please be advised that the Appraisal Staff may be visiting your property to review your parcel information concerning an appeal files, return filed, construction or new improvement or addition, review of parcel, mobile home decals and/or conservation use application. The field appraiser will have photo identification and will be driving a marked county vehicle. Call 706/864-2433 with questions.

Building Plans and site plan or survey will be required. Building plans must be approved by Building Inspector before a permit can be issued.

Water, Sewer and Grinder pump fees are due at the time building permit is issued.

You will need to provide a copy of the General Contractor's state license and copies of the subcontractors license and affidavit.

The information below may help you fill out the building permit application:

Location – include subdivision name & lot number, road name

Construction Type – is structure 1 story, 2 story, etc.

Sq. ft. – square feet of upper levels

Basement area unfinished sq. ft.

Basement area finished sq. ft.

Other Attic, porch, garage – include sq. ft. of all area under the roof

Detached garage? Include sq. ft.

Heat/air – gas, heatpump etc....

bedrooms

bathrooms

Fireplace- how many, are they pre-fab or masonry

Estimated value – this is estimated value of the structure



GENERAL CONTRACTOR AFFIDAVIT

Date: _____

Building Permit # _____ (WILL BE ISSUED AT PERMITTING)

Use: _____

Job Location/Address: _____

General Contractor: _____
Print Name

Company Name: _____

Company Physical Address: _____

City: _____ State: _____ Zip: _____

Company Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Person for this project: _____

Contact Telephone Number: _____

Email: _____

Signature: _____

By signing above I acknowledge that all company licensing (state and business) is compliant and active.

Attach a copy of:
State Contractor's License
Local Business License
Driver's License



Sub-Contractor Affidavit

Electrical _____ Plumbing _____ HVAC _____ Low Voltage _____ Insulation _____

Complete a separate form for each trade. This form must be completed and returned before any inspections covering trade will be scheduled. All work must be installed by license holder or employees of license holder. Attach a copy of your current business license, state license and driver's license.

Building Permit # _____ Site Address _____

Subdivision Name _____ Lot# _____

Builder/Owner Name _____

By signature below the contractor certifies that work is in compliance with current building codes.

Company Name _____ Phone # _____

Print Name of State License holder _____

Signature of State License holder _____

State license Number _____ expiration date _____

Name of Power Company _____

Service Size _____ amps Number of Phases _____

Provide Insulation Information and attach a copy of the Duct Envelope Tightness DET report:

	Kraft	Unfaced	Foil	Loose	R-Value	Thick	Pkgs.	Coverage
Ceilings								
Walls								
Floors								

The State of Georgia Construction Industry Licensing Board Act states in part that;

No person shall engage in the electrical, plumbing, low voltage or conditioned air contracting business unless that person has a valid license from the proper Division of the State Licensing Board.