

City of Nicholson175 Lakeview Drive.
Nicholson, GA 30565**Trade Permit
Application**

- Electrical/ Low V.**
- HVAC/ Mech.**
- Plumbing/ Gas**

Date: ____ / ____ / ____

Permit No. _____

ESTIMATED VALUE (Labor and Materials): \$ _____

JOB SITE ADDRESS:**PROJECT NAME:****SUITE #:**

Property Use:

Zoning Class.:

Job Description: _____
_____**Property Owner**

Name:

Address:

Zip:

Phone:

Email:

Trade Contractor

Name:

State License No.:

Address:

Zip:

Phone:

Email:

of Permanent Fixtures: _____

of HVAC Units: _____

of Service Amps: _____

Contact Person:

Phone/ Fax:

Email:

Total Heated sq. ft.: _____

Total Unheated sq. ft.: _____

Notice: No changes shall be made from that which is stated in this application, or in attached plans and specifications, except by submitting a revised application, plans and/or specifications and receiving approval of the Chief Building Inspector for such change. Granting of a permit shall not be construed as a permit for or an approval of any violation of the Building Code or any other state or local law regulating construction or the performance of construction. I hereby certify that I have read and examined this application and the information provided herein is true and correct. I further certify that all construction will comply with the Minimum Building Codes.

Signature of Licensed Cardholder:

Date:

FOR OFFICE USE ONLY

Accepted by:

Construction Type:

Occupancy:

	Sq. Footage	Valuation Multiplier	Valuation \$	Total Valuation
Heated				
Unheated				
TOTAL				
Administrative Fee:	Plan Review Fee:	Permit Fee:	CC Fee:	Total Fee:
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____