



City of Lithonia
6920 Main Street
Lithonia, GA 30058
Phone: 770-482-8136 Ext. 128
Email: cityclerk@lithoniacity.org

PERMIT APPLICATION

Job Address: _____

PROPERTY OWNER		PHONE
MAILING ADDRESS		EMAIL
GENERAL CONTRACTOR / CONTACT PERSON	PHONE	EMAIL
CONTRACTOR ADDRESS City, State, and Zip		LICENSE NUMBER
PLUMBING CONTRACTOR		LICENSE NUMBER
ELECTRICAL CONTRACTOR		LICENSE NUMBER
MECHANICAL CONTRACTOR		LICENSE NUMBER

DESCRIPTION OF WORK:

IMPORTANT – COMPLETE ALL ITEMS AND MARK ALL APPLICABLE BOXES

<p>PROPOSED PERMIT TYPE</p> <p>RESIDENTIAL</p> <p><input type="checkbox"/> New Single-Family Dwelling</p> <p><input type="checkbox"/> New Accessory Structure</p> <p><input type="checkbox"/> Alteration</p> <p><input type="checkbox"/> Addition</p> <p><input type="checkbox"/> Accessory Structure – Alteration</p> <p><input type="checkbox"/> Pool/Hot Tub</p> <p><input type="checkbox"/> Deck</p> <p>COMMERCIAL</p> <p><input type="checkbox"/> New Commercial</p> <p><input type="checkbox"/> Shell Only</p> <p><input type="checkbox"/> New Multi-Family</p> <p><input type="checkbox"/> Accessory Structure – New</p> <p><input type="checkbox"/> Addition</p> <p><input type="checkbox"/> Alteration</p> <p><input type="checkbox"/> Accessory Structure – Alteration</p> <p><input type="checkbox"/> Pool/Hot Tub</p> <p>MISCELLANEOUS</p> <p><input type="checkbox"/> Electrical Work Only</p> <p><input type="checkbox"/> Plumbing Work Only</p> <p><input type="checkbox"/> Mechanical Work Only</p> <p><input type="checkbox"/> Occupancy</p> <p><input type="checkbox"/> Retaining Wall</p> <p><input type="checkbox"/> Demolition</p> <p><input type="checkbox"/> Sign – Stand Alone</p> <p><input type="checkbox"/> Sign - Wall</p>	<p>SQUARE FOOTAGE</p> <p>Main Floor _____</p> <p>Add. Floors _____</p> <p>Basement _____</p> <p>Covered Porch _____</p> <p>Decks _____</p> <p>Garage _____</p> <p>Other _____</p> <p>TOTAL VALUE OF WORK</p> <p>Building Valuation \$ _____</p> <p>CONSTRUCTION TYPE</p> <p><input type="checkbox"/> Wood Frame</p> <p><input type="checkbox"/> Structural Steel</p> <p><input type="checkbox"/> Masonry</p> <p><input type="checkbox"/> Other _____</p>	<p>MISCELLANEOUS</p> <p>Number of stories _____</p> <p>Lot Size _____</p> <p>Number of Parking Spaces: _____</p> <p>Setbacks:</p> <p>Required: E: _____ W: _____ N: _____ S: _____</p> <p>Shown: E: _____ W: _____ N: _____ S: _____</p> <p>TYPE OF SEWAGE DISPOSAL</p> <p><input type="checkbox"/> Public</p> <p><input type="checkbox"/> Individual (Septic tank)</p> <p>TYPE OF WATER SUPPLY</p> <p><input type="checkbox"/> Private</p> <p><input type="checkbox"/> Public</p> <p>HEATING FUEL TYPE</p> <p><input type="checkbox"/> Gas LP or NG</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Solar</p> <p><input type="checkbox"/> Other _____</p>
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The applicant, his agents and employees shall comply with all the rules, restrictions and requirements of the City and Building Codes governing location, construction, and erection of the above proposed work for which the permit is granted. The City or its agents are authorized to order the immediate cessation of construction at anytime a violation of the codes or regulations appears to have occurred. Violation of any of the codes or regulations applicable may result in the revocation of this permit. Buildings **MUST** conform with plans, as submitted to the City. Any changes of plans or layout must be approved prior to the changes being made. Any change in the use or occupancy of the building or structure must be approved prior to proceeding with construction.

The applicant is required to call for inspections at various stages of the construction, and in accordance with the aforesaid rule, the applicant shall give the building inspector not less than one day's notice to perform such activities.

In the event construction is not commenced within 180 days of issuance of this permit, then the same is automatically void. Cessation of work for a period of 180 continuous days shall also cause this permit to be void. Permits are not transferable.

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as an authorized agent and agree to conform to all applicable laws of the State of Georgia. All information submitted on this application is accurate to the best of my knowledge.

SIGNATURE OF APPLICANT	APPLICATION DATE
APPROVED BUILDING _____ DATE _____	APPROVED PUBLIC WORKS _____ DATE _____