



City of Ball Ground

SERVICE PERMIT Application

215 Valley St, P. O. Box 285 – Ball Ground, Georgia 30107

Phone: 770-735-2123 Fax: 770-735-4575

STAFF USE ONLY		
Permit Number:		Status:
Date Received:	Date Reviewed:	Reviewed by:

- Please ensure all spaces are filled out accurately before signing and returning this form.
- All documents required as part of the application package shall be submitted at the same time as the application.
- Submit only one application per request. If there are multiple landowners, etc., please copy and attach additional signature pages.

PROJECT INFORMATION

Description of Work:

PROPERTY LOCATION INFORMATION

Property Address(es) (If Applicable): _____

Tax Identification Number(s) (TIN) (If Applicable): _____

Subdivision Name (If Applicable): _____

CONTRACTOR INFORMATION

Name (First and Last; Printed): _____
Company Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

PRIMARY CONTACT INFORMATION

Same as above

Name (First and Last; Printed): _____
Phone: _____
Email: _____

PROPERTY OWNER(S) INFORMATION (If Applicable)

Same as above

Name (First and Last; Printed): _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

SUPPORTING DOCUMENTS REQUIRED FOR SUBMISSION:

- Please include the following:
 - A complete permit application.
 - State License
 - Full set of plans for proposed work
 - All subcontractor Affidavits (Inspections will not be performed until all affidavits are in)
 - Payment of all fees

APPLICANT'S AFFIDAVIT

Application is hereby made to obtain a permit to do the work and installation as indicated. I certify that NO work or installation has commenced prior to the issuance of a permit and that all work will be performed to the standards and all laws regulating construction in the City of Ball Ground or Cherokee County, GA. I certify that all the foregoing information is accurate, and all work will be done in compliance with all applicable laws and ordinances regulating construction and zoning in the City of Ball Ground, Cherokee County, and the State of Georgia.

Contractor Name (First and Last; Printed): _____

Phone: _____

Email: _____

Signature: _____

Date Signed: ____/____/____

Same as above

Property Owner Name (First and Last; Printed) (If Applicable):

Phone: _____

Email: _____

Signature: _____

Date Signed: ____/____/____

SUB-CONTRACTOR AFFIDAVIT

This form must be completed, notarized and submitted to the City of Ball Ground prior to obtaining a Certificate of Occupancy. A copy of your current State Trade License must accompany all affidavits.

Job Site Address	Permit #
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Subdivision	Lot#	Suite #	City	Zip Code
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Description of work

This affidavit certifies that I am responsible for the:

<input type="checkbox"/> Electrical Class I	<input type="checkbox"/> Electrical Class II (unrestricted)	<input type="checkbox"/> Low Voltage
<input type="checkbox"/> Mechanical / HVAC Class I	<input type="checkbox"/> Mechanical / HVAC Class II (unrestricted)	<input type="checkbox"/> GAS (to include pools, heated spas and special equipment)
<input type="checkbox"/> Plumbing Class I	<input type="checkbox"/> Plumbing Class II	

The submittal of this affidavit is verification that the undersigned is licensed in the State of Georgia for the trade specified above. In the event of any changes in the status or involvement with this permit, the undersigned is responsible for the work until Cherokee County's Building Official has been notified in writing.

General Contractor	Phone #
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Sub-Contractor Name (please print)

Email

State License Number	Expiration Date
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Company Name	Business Phone #
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Company Address

Company Email

I certify that I have and will comply with all codes and ordinances adopted by the City of Ball Ground that pertain to the work specified above. The undersigned, upon oath, states that the above information is true and correct, understands that the permit issued is only for construction as stated and that the occupancy of the structure is not permissible until all requirements are met and a Certificate of Occupancy has been issued by the City of Ball Ground.

APPLICANT'S NAME _____

APPLICANT'S SIGNATURE _____ DATE _____

Sworn to and subscribed before me,

This _____ day of _____, 20__

SEAL

(Notary Public – Please notarize with official seal)