

CITY OF FAYETTEVILLE
BUILDING PERMIT APPLICATION

City of Fayetteville Building Department
 5 Johnson Ave. Fayetteville, GA 30214
 (770) 719-4062

Type of Work:	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	Application Date:	Estimated Value of Work (Labor and Materials): \$
	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration	____ / ____ / ____	

Site Built Building Industrialized Building Manufactured Home Log Building Other

Construction Type: IA IB IIA IIB IIIA IIIB IVA IVB VA VB

Occupancy: A1 A2 A3 A4 A5 B E F1 F2 H1 H2 H3 H4
 H5 I1 I2 I3 I4 M R1 R2 R3 R4 S1 S2 U

Permitted Area (SF): _____ Heated Area (SF): _____ Unheated Area (SF): _____ Total Area (SF): _____

Applicant Name: _____ Phone: _____ Email: _____

PROJECT INFORMATION

Project Name: _____

Job Site Address: _____ Subdivision: _____
 Lot Number: _____

Property Owner Information: Name: _____ Phone # _____
 Address _____ City _____ State _____ Zip Code _____

SCOPE OF WORK

Attached Garage Detached Garage Finished Basement Siding Deck Carport Pool Sign Storage Building Interior Alteration Exterior Alteration Windows Pool Fence

Scope of work includes: Electrical Plumbing Mechanical

of Bedrooms: _____ # of Dwelling units: _____ # of Stories: _____ Electricity Provider: _____

Exterior Finish Material: _____ Building Height: _____

CONTRACTOR INFORMATION

Business Name: _____ State Certification Number: _____

Address _____ City _____ State _____ Zip Code _____ Phone _____

Print name of Contractor: _____

Email address : _____

I hereby certify that I have read and examined this application 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. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance thereof.

 Signature of Contractor & (State Certification number) _____
 Date

FOR OFFICE USE ONLY		Application Accepted by:	Date:
Adjusted Construction Cost per ICC building valuation Data \$			
WASA Approval	Date	Impact Fee: \$	Date
Plan Review Fee: \$	Permit Fee: \$	Fire Marshal Fee: \$	
LDP Permit: \$	CO Fee: \$	Total Permit Fee: \$	