For	Office Use Only
Permit#	
Date approved:	
Approved by: _	

APPLICATION FOR INPLACE DEMOLITION PERMIT CUSSETA-CHATTAHOOCHEE COUNTY GEORGIA

Date Application is hereby made: _____

PROJECT I	E-911 ADDRESS (IN	ICLUDIN	IG MAP AND PARCEL	#)	
IT IS YO			TO MAKE SURE TED BEFORE DE	_	
ADDRESS	OF DEMO:				
OWNERS	NAME(S):				
ADDRESS	!				
			CELL:		
CONTRAC	CTOR'S NAME:				
ADDRESS					
PHONE: _			CELL:		
License Nu	mber:				
LIST A	LL SUBCONTRAC	CTORS,	LICENSE # AND ADD	RESSES FOR	EACH PERSON(S)
Disconnect	Plumbing/Septic:				
Disconnect	Electric:				
Disconnect	HVAC:				
Commercia Agriculture	ily Dwelling al Structure e Structure red Housing Unit	[] [] []	Multi Family Square Footage: Make/Model		
Year	Size	Se	erial #		(A) (B)

****NOTICE****

This permit becomes null and void if work or construction authorized by this permit is not begun within six (6) months from the date of issuance thereof, or if construction or work is suspended, or abandoned for a period of six (6) months at any time after work is commenced, unless an extension is approved by the Planning Commission for Cusseta-Chattahoochee County, Georgia.

I hereby certify to the best of my knowledge and Belief 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 permit does not presume to give
authority to violate or cancel the provisions of any other federal, state or local law regulating construction
or the performance of construction. I acknowledge receipt of inspection procedures for work covered
under this permit.

XSignature of Contractor, Authorized agent and/or Property Owner						
APPLICATION ACCEPTED BY	PLANS CHECKED BY	APPROVED FOR ISSUANCE BY				

NOTES: