TO: COUNTY BUILDING INSPECTOR:

Application is hereby made according to the requirements of the Building Permit Ordinance to erect/alter a structure described herein or as shown accompanying plans and specifications.

PERMIT APPLICATION	ON TO SPECIFY TO:		
	Erect:	Single Family Residence:	
	Alter:	Duplex Residence:	
	Repair:	Apartment Building:	
	Move:	Retail Outlet:	
	Demolish:	Industrial Building:	
	Other:	Other:	
	Block #: Su	bdivision:	
Address:	Block #: Su		
Address:U	Block #: Su	bdivision:	
Address:Uegal Lot #:U Zoned:U No. of Stories:	Block #: Su se: Acreage: No. of Bathrooms:	bdivision: Total Sq. Ft of Building:_	
Address:U Legal Lot #:U Zoned:U No. of Stories:	Block #: Sulse: Acreage: No. of Bathrooms: Garage Size:	bdivision:Total Sq. Ft of Building:No. of Bedrooms:	Well:

CONTRACTORS:				
General Contr	actor:	License #:		
Electrical Con	tractor:	License #:		
Plumbing Con	tractor:	License #:		
HVAC Contrac	etor:	License #:		
OWNER INFORMATION:				
Name:		Address:		
Phone:				
AFFIDAVIT:				
	that if normit is granted	I agree to conform to all Lo	as County Building Codos	Coordia
		as international residential co		
Signature:	Appr	oved:		
Paid: Date:	Permit #:_			
LONG COUNTY, GEORGIA	l			
This permit shall I	become invalid if applican	t fails to comply with appropria	ate county, state and feder	al laws as
_		ons, zoning restrictions, envi		
by it shall have been comm		-	i codes and diffess work a	iutiloi izeu

AFFIDAVIT PAGE:

PLEASE PRINT CLEARLY

General Contractor Name:	
Address:	Zip:
Phone #:	_ License #:
AFFIDAVIT: I swear or affirm that if permit is gra Electrical, Plumbing and Fire Codes as well as Inter	anted, I agree to conform to all Long County Building Codes, Georgia Building, national Residential, IBC, IMC, IPC, IFC, IFGC, NEC.
Signature:	
Electrical Contractor Name:	
	Zip:
Phone #:	_ License #:
AFFIDAVIT: I swear or affirm that if permit is gra Electrical, Plumbing and Fire Codes as well as Inter	anted, I agree to conform to all Long County Building Codes, Georgia Building, national Residential, IBC, IMC, IPC, IFC, IFGC, NEC.
Signature:	
Plumbing Contractor Name:	
Address:	Zip:
Phone #:	_ License #:
AFFIDAVIT: I swear or affirm that if permit is gra Electrical, Plumbing and Fire Codes as well as Inter	nted, I agree to conform to all Long County Building Codes, Georgia Building, national Residential, IBC, IMC, IPC, IFC, IFGC, NEC.
Signature:	
HVAC Contractor Name:	
	Zip:
Phone #:	_ License #:
	inted, I agree to conform to all Long County Building Codes, Georgia Building,
Signature:	

VERIFICATION OF CURRENT PAID PROPERTY TAXES FOR APPLICATION

THE UNDERSIGNED BELOW IS AUTHORIZED TO MAKE THIS APPLICATION. THE UNDERSIGNED CERTIFIES THAT ALL LONG COUNTY PROPERTY TAXED TO DATE FOR THIS PARCEL LISTED BELOW HAVE BEEN PAID IN FULL. IN NO CASE MAYU A BUILDING PERMIT APPLICATION BE PROCESSED WITHOUT VERIFICATION OF PAID PROPERTY

TAXES.		
A SEPARATE F	FORM MUST BE SUBMITTED FOR EACH PARCEL	
Map and Parcel:		
	Date:	
Long County Tax Commissioner Only		
PAYMENT OF ALL PROPERTY TAXES E VERIFIED AS PAID CURRENT AND CONFIR	BILLED TO DATE FOR THE ABOVE REFERENCED RMED BY THE SIGNATURE BELOW.	PARCEL HAVE BEEN
Name:	Title:	_
Date:		
Long County Tax Assessors Office Only		
Map and Parcel Number:		_
THE MAP AND PARCEL NUMBERS FOR CONFIRMED BY THE SIGNATURE BELOW.	R THE ABOVE REFERENCED HAVE BEEN VERIFIE	D AS CORRECT AND
Name:	Title:	_
Date:		





Alexandra Swanson Office Administrator

Eric Petoff Code Enforcement Supervisor

Long County
Code Enforcement Office

75 W Academy St Ludowici, GA 31316 Phone (912)545-3683 Fax (912) 545-3271

LIST OF INSPECTIONS REQUIRED WITH BUILDING PERMITS
<u>NEW HOME</u>
1.Slab/Footer 2.Cover Up 3.Temporary Power 4.Permanent Power 5.Final
A CO will not be issued until and Blower Door Test(by your Heating & Air Company) is performed and a Final Inspection has been completed.
ADDITIONS/SHED/REVOATIONS WITH POWER & OR PLUMBING
1.Slab/Footer (if Applicable) 2.Cover Up 3.Permanent Power 4.Final
OTHER BUILDINGS WITH NO POWER OR PLUMBING
1.Slab/Footer (If Applicable) 2.Final