



Building Permit and/or Approval/Occupancy Inspection Application

CITY USE ONLY		Permit #: _____
Plan Review#:	Review Fee:\$ _____	Ref. Permit #: _____
		Permit Fee:\$ _____

This application is made in accordance with the laws and ordinances of the City of Lilburn. The Building Permit issued is granted for the erection, alteration and use of a structure as described herein, according to the plans or specifications submitted and is to be located on the property as shown on the accompanying plat.

<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential PERMIT INFORMATION (Check all that apply)	
<input type="checkbox"/> Building/Trade Permit <input type="checkbox"/> Utility (Power/Gas) Connect <input type="checkbox"/> New Business/Name/Owner <input type="checkbox"/> Certificate of Occupancy <input type="checkbox"/> Demolition* <input type="checkbox"/> Bldg Addition <input type="checkbox"/> Alteration/Renovation <input type="checkbox"/> Certificate of Approval	
Street Address/Suite:	Subdivision: Block: Lot:
Name of Development:	M.E.P Trades Included: <input type="checkbox"/> Mechanical/HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing
District Land Lot Parcel Zoning 6	<input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Septic Tank
Details of New Business:	
Details of Construction (attach plans as needed):	
Power Co.:	New Construction (List square footage of each) <input type="checkbox"/> Heated Area: _____ <input type="checkbox"/> Garage Area: _____ <input type="checkbox"/> Deck Area: _____ <input type="checkbox"/> Unfinished Basement: _____ <input type="checkbox"/> Utility: (Patio/Porch) _____
Water Meter #:	
Setback from Property Lines: Front Rear Left Side Right Side	Addition/Renovation (List square footage of each) <input type="checkbox"/> Sunroom: <input type="checkbox"/> Garage: <input type="checkbox"/> Basement Finish: <input type="checkbox"/> Other:
ICC Building Valuation: (i.e. A-1, B, M,...R-3 / IA, IIA,...VB)	Number of:
Occupancy Type: _____ Construction Type: _____	Rooms Bedrooms Baths
Building Dimensions: _____ X _____	Stories Dwelling Units
Total Square Footage:	Multifamily Number of Units: 1 BR 2 BR 3 BR
*Requires Demolition Inspection Application.	All waste to be disposed of through Advanced www.WM.com
PROPERTY OWNER	<input type="checkbox"/> TENANT/BUSINESS OWNER or <input type="checkbox"/> CONTRACTOR**
Business Name	Business Name
Street, Suite	Street, Suite
City, State, Zip	City, State, Zip
Owner Name (print)	Contact Name (print)
Other Contact (ie Prop Mgr):	
Phone:	Phone:
Email:	Email:
** Attach copy of Contractor Business License, State License if applicable, photo ID, and proof of \$1,000,000 Property Damage Liability Insurance. ** General Contractors are responsible for verifying Business License, State License and Liability Insurance of all Subcontractors.	

Under signer upon oath states that the above information is true and correct, understands that the Permit issued is only for construction as stated, and that occupancy of the structure is not permissible until all requirements are met and a Certificate of Occupancy has been issued by the City of Lilburn.

Expediter (With Permit authorization) Contractor Owner

Applicant's Signature: _____ Print Name: _____ Date: _____