COMMERCIAL BUILDING PERMIT

City of Flowery Branch - Planning and Community Development Dept.
5512 Main Street – Flowery Branch, GA 30542
Ph 770-967-6378 fx 770-967-6357 – www.flowerybranchga.org

Applicant to complete numbered spaces only

1. √ **Only One** ☐ Commercial ☐ Industrial ☐ Institutional ☐ Other

Project Description_____

2. Job Address or location:

3. Owner	Address	Zip	Ph
		e-mail	
4. Contractor	Address	Zip	Ph
		e-mail	
5. Architect or Designer	Address	Zip	Ph
		e-mail	
6. Engineer	Address	Zip	Ph
		e-mail	

7. Type of construction:_____ √ **Only One** ☐ Septic ☐ Sewer

8. Bldg information: Size of Bldg _____sq ft / No. of stories_____ / Occupancy_____

Description of work: ☐ **NEW** ☐ **INTERIOR FINISH** ☐ **SHELL** ☐ **ADDITION** ☐ **REPAIR** ☐ **OTHER**

Other_____Bldg Valuation: _____

9. **SPECIAL CONDITIONS**: Set by City Council , Planning Dept or other. (Rezoning, Variance or CUP approval No.):

NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 120 DAYS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED

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 OF CONSTRUCTION.

Signature of Contractor or authorized agent *Date*

Signature of Owner (If Owner/ Builder) *Date*

OFFICE USE ONLY

Plans accepted by: Date:

Plan check fee: ☐ Paid

Permit fee: ☐ Paid

Plans approved for permitting on:

Special Approvals	Required	Received	Not Required
City Engineer (RMA)	☐	☐	☐
Health Dept.	☐	☐	☐
Fire Dept.	☐	☐	☐
Gainesville Utility	☐	☐	☐
Pond Bldg Review	☐	☐	☐

When properly validated (in this space) this is your permit #