



21 North Avondale Plaza
Avondale Estates, Georgia 30002
404-294-5400 (Phone) - 404-299-8137 (Fax)

COMPONENT PERMIT APPLICATION **FOR STAND-ALONE PROJECTS ONLY**

OVERVIEW

This packet contains the information required to file a Component Permit Application for: Mechanical, Electrical, Plumbing, HVAC, and Low Voltage/Alarm System.

Building contractors and subcontractors (trades) must submit a Contractor Affidavit form and a copy of the contractors current Business License, State License and Driver's License. All information requested on the Contractor Affidavit is mandatory and must be notarized. City Hall will notarize the Contractor Affidavit for free.

A licensed contractor can designate an individual to obtain permits on his/her behalf for a project(s). The contractor would need to submit an Authorized Permit Agent Form for each project that he/she designates an individual to obtain permits.

FEE SCHEDULE

Administration Fee: \$50

Inspection Fee: \$75

Total Cost: \$125

Payment can be made by cash or check made payable to the City of Avondale Estates.

INSPECTIONS

Once your permit is issued, the permit will be emailed to contractor/subcontractor along with the **code and permit number** to schedule inspection(s). Inspections can be scheduled by called 404-294-5400.

EXPIRATION NOTICE

Permits will expire if no activity takes place for six consecutive months. All work performed under the permit must be completed within (1) year from permit issuance.

CONTACT US

Permit Concierge Coordinator

Ken Morris

404-294-5400

kmorris@avondaleestates.org

City Clerk

Gina Hill

404-294-5400

ghill@avondaleestates.org

Code Enforcement Officer

Caryl Albarran

404-392-3134

calbarran@avondaleestates.org

Director of Public Works/
Code Enforcement

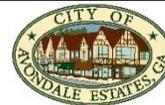
Oscar Griffin

404-391-7329

ogriffin@avondaleestates.org

COMPONENT PERMIT APPLICATION

For Stand-Alone Projects ONLY



21 North Avondale Plaza
Avondale Estates, Georgia 30002
Ph: (404) 294-5400
Fx: (404) 299-8137
www.avondaleestates.org

Permit #:

Date:

Project Information:

Project Type: Mechanical Electrical Plumbing HVAC Low Voltage/Alarm System

Project Description: _____

Project Address: _____ Suite #: _____

Applicant Information:

Company Name: _____

Contact Name: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Property Owner Information: Check Here if same as Applicant

Owner's Name: _____

Owner's Address: _____

Phone: _____ Fax: _____ Email: _____

Contractor Information: Check Here if same as Applicant

Company Name: _____

Contact Name: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Contractor License Information:

State Trade License Number(s): _____ Expiration: _____

Local Business License # _____ County/City: _____ Expiration: _____

Fee:

\$125.00

Cash

Check# _____

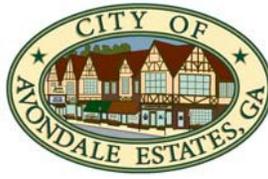
Received by: _____

Terms & Conditions

The undersigned, 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. This permit is granted on the express condition that the said construction shall, in all respects, conform to the ordinances of this jurisdiction including the zoning ordinance, regulating the construction and use of buildings, and may be revoked at any time upon violation of any provisions of said ordinances. A complete set of approved plans must be furnished to the City on all non-residential projects. Construction will begin no later than six months from the issue date of the permit. All required Contractor State Licenses, Sub-Contractor Affidavits, and Business Licenses must be submitted with the completed application. If any information is found to be false or misrepresented, the permit will be deemed invalid. I agree to indemnify and hold the city harmless from all damages, demands or expenses of every character which may in any manner be caused by construction and/or the structure.

Applicant's Signature: _____

Print Name: _____ Date: _____



CONTRACTOR AFFIDAVIT

All information requested on the Contractor affidavit is mandatory and must be notarized. City Hall will notarize the affidavit for free.

Contractor Name: _____

Site Address _____

This is to certify that I am responsible for (check all that apply).

Commercial

Residential

HVAC

Electrical

Low Voltage

Mechanical

Plumbing

I certify that I have and will comply with all codes and ordinances adopted by the City of Avondale Estates that pertain to the construction of this site. In the event of any change in my status on this installation, I understand that I will be held responsible for all indicated work at this job until Building Inspections has been notified in writing. I further agree to indemnify the City of Avondale Estates and its operator from any liability for damages and loss of property if the work performed under my authority has not been installed in accordance with these codes and ordinances.

Name: _____

(Print)

Signature: _____ Date: _____

State License#: Business

License# Contractor _____

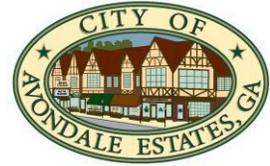
Business Name: _____

Business Phone: _____ Cell Phone: _____

Sworn to and subscribed before me this ____ day of _____, 20____.

Signature and Seal of Notary Public

My Commission Expires _____



21 N. Avondale Plaza, Avondale Estates, GA 30002
Phone: (404) 294-5400 | Fax: (404) 299-8137

State Licensing Board for Residential and General Contractors Authorized Permit Agent Form

License verification by permitting office should be completed by visiting: sos.ga.gov/plb/

Licensed Contractor: Individual Qualifying Agent

Name of licensed person _____

*Please attach a copy of Individual license or Company License (Reflects company and qualifying agent license number)

License number of individual or qualifying agent: _____

Name of licensed company (if applicable): _____

License number of company (if applicable): _____

I, _____, hereby designate
Licensed Individual or Qualifying Agent

_____ to apply for and obtain the permit(s) for the

*Please attach a copy of the authorized permit agent's driver's license.

Project at:

Street address

Apartment or Suite Number

City

Zip Code

Authorized Permit Agent's

Driver's License Copy HERE

(Required)

I, the undersigned, being the contractor as either an individual or a qualifying agent, do hereby affirm and swear, under oath, that all information on this form and on accompanying documents are true and correct.

Signature of individual or qualifying agent _____ State of

_____ County of _____ Subscribed and sworn

to before me this _____ day of _____ 20__

Signature of Notary Public _____ (Seal)