



330 Town Center Avenue • Suwanee, GA 30024  
 (770)945-8996 • (770)945-2792 (Fax)  
 www.suwanee.com

# Permit Application

Permit Date \_\_\_\_\_

Permit Number \_\_\_\_\_

New Construction, Remodel/Addition, Demolition

As the owner of record or the authorized agent of the owner of record, I hereby apply for a permit to erect/alter and use the structure(s) as described herein and/or shown on the accompanying plan and specifications. Said structure(s) is to be located as shown on the plot plan. If the permit is granted, I agree to construct same according to the laws and ordinances of the City of Suwanee and to conform to all laws and ordinances regulating same. I also certify authorization to the inspection by the employees of the City of Suwanee of the described premises at any time when work on those premises is ongoing and hereby grant consent. I understand that the structure authorized by this permit shall not be occupied until all inspections have been made and the **Certificate of Occupancy** has been approved by the Gwinnett County Fire Department, Gwinnett County Environmental Health Department (if applicable) and issued by the City of Suwanee.

Address of Project \_\_\_\_\_ Suite # \_\_\_\_\_ Value of Construction \$ \_\_\_\_\_

Parcel # \_\_\_\_\_ Describe Project \_\_\_\_\_

### LAND OWNER OF RECORD

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

### BUILDING CONTRACTOR

Contractor \_\_\_\_\_ 24 hr Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Ga Contractor's License # \_\_\_\_\_

### PROPERTY/STRUCTURE INFORMATION

Use \_\_\_\_\_ Zoning \_\_\_\_\_ Subdivision/Business Park \_\_\_\_\_

Lot # \_\_\_\_\_ Width of Lot: \_\_\_\_\_ Depth of Lot \_\_\_\_\_ Width of Bldg. \_\_\_\_\_ # of Stories \_\_\_\_\_

# of Rooms \_\_\_\_\_ Heated Floor Area (sq. ft.) \_\_\_\_\_ # of Bathrooms \_\_\_\_\_ Basement (sq. ft.) \_\_\_\_\_

Finished Basement? Yes / No Setbacks from property lines: Left \_\_\_\_\_ Right \_\_\_\_\_ Front \_\_\_\_\_ Rear \_\_\_\_\_

Electric Utility Company \_\_\_\_\_ For apartments: # of Buildings \_\_\_\_\_ # of units \_\_\_\_\_

**Note: Complete plans must be furnished on all permit submittals other than single-family detached residential housing. Permit will expire unless work is commenced within 180 days, or if work is suspended or abandoned for a period of 180 days after work has commenced. Erosion control must be installed prior to the commencement of construction and be maintained throughout project until all land is stabilized.**

Applicant's Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Personally appeared the above name applicant, who on oath says that (he) (she) is the owner of record or represents the owner of record of the subject property, and that all the above statements are true to the best of (his) (her) knowledge.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_. (Seal)

Notary Signature \_\_\_\_\_

Building Official Approval \_\_\_\_\_

Date \_\_\_\_\_

Planning Department Approval (if required) \_\_\_\_\_

Total Fees Due \$ \_\_\_\_\_ (includes all applicable fees)