



SECTION 1 | PROJECT INFORMATION

Permit #: _____ Estimated Completion Date: _____
 Project Address: _____ City/State: _____ Zip: _____
 Gas Release? Yes No Gas Company: _____ Power Release? Yes No Power Company: _____

SECTION 2 | CONTRACTOR INFORMATION

Company Name: _____
 Address: _____ City/State: _____ Zip: _____
 Email: _____ Phone: _____
 Business License #: _____ Issuing Jurisdiction: _____ Expiration Date (mm/dd/yy): _____
 Company's State License #: _____ Expiration Date (mm/dd/yy): _____

SECTION 3 | SUBCONTRACTOR INFORMATION

MECHANICAL	Name of License Holder: _____
	Business License #: _____ Issuing Jurisdiction: _____ Expiration Date (mm/dd/yy): _____
	State License #: _____ Expiration Date (mm/dd/yy): _____
.....	
ELECTRICAL	Name of License Holder: _____
	Business License #: _____ Issuing Jurisdiction: _____ Expiration Date (mm/dd/yy): _____
	State License #: _____ Expiration Date (mm/dd/yy): _____
.....	
PLUMBING	Name of License Holder: _____
	Business License #: _____ Issuing Jurisdiction: _____ Expiration Date (mm/dd/yy): _____
	State License #: _____ Expiration Date (mm/dd/yy): _____
.....	
GAS PIPING	Name of License Holder: _____
	Business License #: _____ Issuing Jurisdiction: _____ Expiration Date (mm/dd/yy): _____
	State License #: _____ Expiration Date (mm/dd/yy): _____
.....	
GREASE HOOD	Name of License Holder: _____
	Business License #: _____ Issuing Jurisdiction: _____ Expiration Date (mm/dd/yy): _____
	State License #: _____ Expiration Date (mm/dd/yy): _____

SECTION 4 | APPLICANT CERTIFICATION

As the contractor or authorized agent, I hereby apply for a permit to construct/modify the structure as described and to ensure the following:

1. Locate the structure in compliance with all applicable plans and minimum setback distances from property lines.
2. Construct in accordance with the applicable regulations, codes, and ordinances of Gwinnett County.
3. Use of the structure, system, or space associated with this building permit is authorized only upon issuance of a Certificate of Occupancy/Completion by the Department of Planning and Development and by the Department of Fire and Emergency Services (as applicable).
4. Applicant must hold a valid Occupational Tax Certificate (business license) for the type of construction authorized by the permit.

I hereby certify that I am the **contractor**, or the **authorized agent of the contractor**, and all information contained hereon is true and accurate.

Authorized Agent: _____ Phone Number: _____ Email: _____

Applicant Signature: _____ Date: _____