



**City of Snellville**  
DEPARTMENT OF PLANNING AND DEVELOPMENT  
2342 OAK ROAD, 2<sup>ND</sup> FLOOR  
SNELLVILLE, GA 30078  
[www.snellville.org](http://www.snellville.org)

(770) 985-3513  
(770) 985-3514

**RESIDENTIAL SINGLE FAMILY  
NEW , ADDITIONS, REMODELS  
BUILDING PERMIT CHECKLIST AND APPLICATION**



VERIFY THAT THE ADDRESS/PARCEL IS LOCATED WITHIN THE CITY OF  
SNELLVILLE BY CALLING OUR OFFICE OR VISITING US ONLINE AT  
<https://www.snellville.org/am-i-city>

**A COMPLETE SUBMITTAL INCLUDES:**

**PLANS:**

- \_\_\_\_ SUBMIT (3) SETS PRINTED PLANS, BOUND IN ORDER, 24" X 36" BUILDING SITE LOCATION AND BUILDING PLAN DETAILS.
- \_\_\_\_ SUBMIT (1) PDF VERSION

**FORMS:**

- \_\_\_\_ COMPLETE – PLAN REVIEW FORM
- \_\_\_\_ COMPLETE - BUILDING PERMIT APPLICATION
- \_\_\_\_ COMPLETE – GENERAL CONTRACTOR REGISTRATION OR HOMEOWNER ACTING AS GENERAL CONTRACTOR AFFIDAVIT
- \_\_\_\_ COMPLETE – SOLID WASTE AFFIDAVIT
- \_\_\_\_ COMPLETE – EACH SUB CONTRACTOR TO COMPLETE AN AFFIDAVIT AND SUBMIT LICENSES AND A COPY OF THE DRIVER'S LICENSE FOR THE STATE CARD HOLDER – BEFORE ANY INSPECTIONS ARE REQUESTED
- \_\_\_\_ COMPLETE – EROSION CONTROL AFFIDAVIT IF DISTURBING MORE THAN 1 ACRE OF SOIL. ***IF DISTURBING MORE THAN 1 ACRE.***
- \_\_\_\_ SUBMIT GENERAL CONTRACTOR'S STATE PROFESSIONAL LICENSE, CURRENT BUSINESS LICENSE AND COPY OF STATE CARD HOLDERS DRIVER'S LICENSE
- \_\_\_\_ SUBMIT WATER/ SEWER OR WATER/SEPTIC APPROVALS

**FEES**

NEW SINGLE FAMILY RESIDENTIAL							
REVIEW FEE	.....	\$100.00					
PERMIT FEE							
BUILDING PERMIT FEES ARE COLLECTED AFTER THE PERMIT IS APPROVED AND READY FOR PICK UP.							
FEES ARE CALCULATED USING THE ICC (INTERNATIONAL CODE COUNCIL) BUILDING VALUATION DATA							
AT A RATE OF \$6.00 PER \$1000.00 OF CONSTRUCTION VALUE							
(+) CERTIFICATE OF OCCUPANCY	.....	\$50.00					
MINOR RENOVATION PROJECTS							
REVIEW FEE	.....	\$50.00					
PERMIT FEE							
		CONSTRUCTION COST			ONE & TWO FAMILY RESIDENTIAL		
MINOR RENOVATION PROJECTS (LESS THAN \$75,000)		UP TO \$15,000			\$80		
		\$15,001-\$25,000			\$125		
		\$25,001-\$50,000			\$200		
		\$50,001-\$75,000			\$300		
(+) CERTIFICATE OF OCCUPANCY OR COMPLETION	\$50.00						
EXTENSIVE RENOVATION PROJECTS (GREATER THAN \$75,000)							
\$6.00 PER \$1,000 CONSTRUCTION VALUE							

REV 4.1.25



RECEIVED STAMP IMPRINT  
HERE

**CITY OF SNELLVILLE**  
DEPARTMENT OF PLANNING & DEVELOPMENT  
2342 Oak Rd. 2nd Floor  
Snellville, GA 30078  
Phone (770) 985-3513 or (770) 985-3514

## BUILDING PLAN SUBMITTAL FORM

PLEASE MAIL OR HAND DELIVER  
CANNOT ACCEPT ELECTRONIC SUBMITTALS

### APPLICANT & CONTACT INFORMATION

FIRM NAME: \_\_\_\_\_  
CONTACT NAME \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE NUMBER \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

### PLANS SUBMITTED BY

☐ GENERAL CONTRACTOR  
☐ PROFESSIONAL ARCHITECT  
☐ RESIDENT/HOMEOWNER  
☐ OTHER \_\_\_\_\_

### PROJECT TYPE

☐ COMMERCIAL ☐ RESIDENTIAL ☐ NEW CONSTRUCTION (COMPLETE)  
☐ INDUSTRIAL ☐ MIXED USE ☐ SHELL ONLY  
☐ INTERIOR FINISH ☐ WHITE BOX ☐ ADDITION  
☐ ACCESSORY STRUCTURE ☐ MONUMENT SIGN OTHER \_\_\_\_\_

### PLAN REVIEW FEES COLLECTED

### PROJECT INFORMATION

PROJECT NAME \_\_\_\_\_  
PROJECT STREET ADDRESS \_\_\_\_\_  
SUITE NUMBER \_\_\_\_\_ PARCEL \_\_\_\_\_  
ZONING DISTRICT \_\_\_\_\_

TOTAL SQ FT \_\_\_\_\_  
CONSTRUCTION  
CONTRACT PRICE (REQUIRED)  
\$ \_\_\_\_\_

### PLAN REVIEW ACKNOWLEDGEMENT

In accordance with Part 2 of Article 1 of Chapter 2 of Title 8 of the Official Code of Georgia Annotated, and upon receipt and acceptance of the submitted building plans, the City of Snellville hereby notifies permit Applicant that the City of Snellville intends to complete the required plan review within 30 days of receiving the plans.

If applicable, a written notice of plan deficiencies will be provided to the permit Applicant and the 30 day period will then be tolled pending resolution of the matter. Upon receipt of any plan revisions which addresses the plan deficiencies, the local building official shall have the remainder of the tolled 30 day period plus and additional five (5) business days to issue the requested permit or to provide a second written notice to the permit applicant stating which of the previously identified plan features remain in non-compliance with the applicable codes. In the event that the revisions required to address the plan deficiencies or any additional revisions submitted by the permit Applicant require that new government approvals be obtained, the permit Applicant shall be required to obtain such approvals before a new plan report can be submitted.

APPLICANT PRINTED NAME	DATE	BUILDING OFFICIAL PRINTED NAME	DATE
APPLICANT SIGNATURE		BUILDING OFFICIAL SIGNATURE	

*This route sheet shall be completed by the plan preparer in its entirety and submitted with each submittal.*

**APPLICATION FOR BUILDING PERMIT**  
**CITY OF SNELLVILLE, GEORGIA**

FOR CITY USE ONLY

Date Rcvd: \_\_\_\_\_

Permit No. \_\_\_\_\_

MAIL OR HAND DELIVER

**DESCRIPTION OF WORK (Please mark all that apply)**

☐ RESIDENTIAL ☐ COMMERCIAL

- |   |                                     |                                     |   |
|---|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> ADDITION   | <input type="checkbox"/> REPAIR     | <input type="checkbox"/> ACCESSORY STRUCTURE  |
| <input type="checkbox"/> INTERIOR FINISH  | <input type="checkbox"/> ALTERATION | <input type="checkbox"/> SHELL ONLY | <input type="checkbox"/> MONUMENT / WALL SIGN |

Description of Proposed Construction \_\_\_\_\_

Project Name or Business Location Name \_\_\_\_\_

Job Address \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Project/Subdivision \_\_\_\_\_ Tax Parcel # \_\_\_\_\_ - Zoning \_\_\_\_\_

**BUILDING INFORMATION (NEW OR AFFECTED AREA ONLY)** Basement / Slab / Crawl Space (Circle One) \_\_\_\_\_

Stories \_\_\_\_\_ Rooms \_\_\_\_\_ Baths \_\_\_\_\_ Bedrooms \_\_\_\_\_ Heated Sq.Ft. \_\_\_\_\_ Total Sq.Ft. \_\_\_\_\_

Lot Size \_\_\_\_\_ Water Tap # \_\_\_\_\_ Sewer Tap # \_\_\_\_\_ Septic # \_\_\_\_\_ On Septic: ☐ Yes ☐ No

☐ Sprinkler (Protected) ☐ Unprotected (Check One) Construction Contract Price \$ \_\_\_\_\_

**TYPE OF CONSTRUCTION (NEW CONSTRUCTION ONLY)** ☐-IA ☐-IB ☐-IIA ☐-IIB ☐-IIIA ☐-IIIB ☐-IV ☐-VA ☐-VB

**OCCUPANCY TYPE (GROUP DESCRIPTIONS ON INTERNATIONAL BUILDING CODE LISTING)**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> -A-1 Assembly, theaters, with stage                         | <input type="checkbox"/> -E Educational                               | <input type="checkbox"/> -M Mercantile                                     |
| <input type="checkbox"/> -A-1 Assembly, theaters, w/o stage                          | <input type="checkbox"/> -F-1 factory and industrial, moderate hazard | <input type="checkbox"/> -R-1 Residential, hotels                          |
| <input type="checkbox"/> -A-2 Assembly, nightclubs                                   | <input type="checkbox"/> -F-2 Factory and industrial, low hazard      | <input type="checkbox"/> -R-2 Residential, multiple family                 |
| <input type="checkbox"/> -A-2 Assembly, restaurants, bars, banquet halls             | <input type="checkbox"/> -H-1 High Hazard, explosives                 | <input type="checkbox"/> -R-3 Residential, one- and two-family             |
| <input type="checkbox"/> -A-3 Assembly, churches                                     | <input type="checkbox"/> -H234 High Hazard                            | <input type="checkbox"/> -R-4 Residential, care/assisted living facilities |
| <input type="checkbox"/> -A-3 Assembly, general, community halls, libraries, museums | <input type="checkbox"/> -H-5 HPM                                     | <input type="checkbox"/> -S-1 Storage, moderate hazard                     |
| <input type="checkbox"/> -A-4 Assembly, arenas                                       | <input type="checkbox"/> -I-1 Institutional, supervised environment   | <input type="checkbox"/> -S-2 Storage, low hazard                          |
| <input type="checkbox"/> -B Business   | <input type="checkbox"/> -I-2 Institutional, incapacitated            | <input type="checkbox"/> -U Utility, Garages, miscellaneous                |
|  | <input type="checkbox"/> -I-3 Institutional, restrained               |  |
|  | <input type="checkbox"/> -I-4 Institutional, day care facilities      |  |

**OWNER** \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

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

Fax ( \_\_\_\_\_ ) Cell ( \_\_\_\_\_ ) E-Mail \_\_\_\_\_

**CONTRACTOR** \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

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

Fax ( \_\_\_\_\_ ) Cell ( \_\_\_\_\_ ) E-Mail \_\_\_\_\_

Business License # \_\_\_\_\_ Issuing Authority \_\_\_\_\_ Exp. Date \_\_\_\_\_

As the contractor, builder, owner or authorized agent, I hereby apply for a permit to erect/alter and use the structure as described herein and/or shown on accompanying plans and specifications. If a plot plan is required, said structure will be located as shown on the plot plan. If the permit is granted, I shall construct same according to the development regulations, ordinances and code of the City of Snellville. Further, I shall be responsible for complying with all subdivision protective covenants (where applicable) and required set backs. I also understand that the structure authorized by the permit shall not be occupied or used until all inspections have been made, all re-inspection fees and fines paid and the Certificate of Occupancy/Completion has been issued by the Department of Planning & Development (and by the Gwinnett County Department of Fire & Emergency Services, when applicable). Applicant must hold a valid Occupational Tax Certificate (AKA "business License") for the type of construction covered by the permit issued. A homeowner is not required to have an Occupational Tax Certificate if building one's own personal home (not more than one home per year). I understand that before any inspections will be made, erosion control measures must be installed and properly maintained daily and licensed subcontractor affidavits must be submitted and accepted. I hereby certify that I am the property owner or the authorized agent of the property owner and that all information contained hereon is true and accurate.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

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**GENERAL CONTRACTOR REGISTRATION**

***PLEASE ATTACH A COPY OF YOUR CURRENT OCCUPATIONAL  
TAX CERTIFICATE (BUSINESS LICENSE) & STATE OF GA  
PROFESSIONAL LICENSE WITH THIS FORM***

**GENERAL CONTRACTORS ARE REQUIRED TO CALL IN ALL INSPECTIONS FOR ALL TRADES**

**COMPANY NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**CITY/STATE/ZIP:** \_\_\_\_\_

**APPLICANT'S NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CELL:** \_\_\_\_\_

**CITY/STATE/ZIP:** \_\_\_\_\_

**STATE CARD NO:** \_\_\_\_\_ **CLASSIFICATION:** \_\_\_\_\_

**OCCUPATION TAX CERTIFICATE NO:** \_\_\_\_\_ **EXP. DATE:** \_\_\_\_\_  
(Business License #)

In filing this application for registration, I hereby certify that I am experienced in the classification above and am either familiar with, or will become familiar with all requirements and will abide by all the rules and regulations set forth by the City of Snellville Planning & Development Department.

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Applicant's Signature

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Print Name



## AFFIDAVIT OF HOMEOWNER ACTING AS GENERAL CONTRACTOR

SUBMIT

Property Address: \_\_\_\_\_ Subdivision Name: \_\_\_\_\_

Home Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_

- FOR (Check one):
- ☐ NEW CONSTRUCTION
  - ☐ ALTERATION / REMODEL / ADDITION
  - ☐ REPAIR (FIRE OR OTHER HAZARD DAMAGE)

Describe Work to be Performed: \_\_\_\_\_

I, homeowner of the subject property, will be acting as general contractor for work to be performed at this property. I will personally perform the work, or I will directly hire and pay the individual trades to perform the work, including framing, electrical, mechanical, plumbing, roofing, siding, drywall, painting, etc., as applicable. I will be personally providing direct supervision and management of all trades.

I will not hire or contract with any unlicensed individual or company to obtain, manage, or supervise the construction trades people because I understand that any person performing these management tasks must have a contractor's license under Georgia Law.

I also recognize that if I contract with an unlicensed individual or company to perform work which, in Georgia, requires a contractor's license, such contract may be unenforceable under Georgia law. I further understand that knowingly representing that I will be homeowner/contractor for the purposes of obtaining a building permit, when in fact I will not be personally performing or managing the work, is a misdemeanor and may result in fines or other remedies of law.

I will personally perform the work, or I will directly hire and pay the following individuals or companies (as applicable), as itemized on the attached schedule.

I, the undersigned, do hereby affirm and swear, under oath, that all information on this form and on accompanying documents is true and correct.

Home Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

State of Georgia, County of Gwinnett

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

Signature of Notary Public \_\_\_\_\_

AFFIX NOTARY SEAL



## **SOLID WASTE AFFIDAVIT & DISCLOSURE FORM**

In accordance with chapter 46 of the Snellville Code of Ordinances, The City grants to the franchisee the exclusive right and privilege to operate and maintain a refuse collection service in, upon, along, across, above, and over the streets, alleys, public ways and public places in the City. All refuse accumulated in the City shall be collected, conveyed and disposed of by only the franchisee.

Haul-off services provided by a third-party who provides a container (open-top and roll-off dumpster or three cubic yard "bagster" or similar type bag, but not including front-load dumpsters) for solid waste on a temporary basis which is later removed by the third party for disposal elsewhere is permitted.

Construction and demolition waste disposal; on-site burial/disposal of construction and demolition waste is prohibited by Georgia law and the City of Snellville solid waste ordinance.

### **BOX 1 – Business License Applicants**

Name of Business \_\_\_\_\_

Business Location \_\_\_\_\_ Suite \_\_\_\_\_

Is Business location in a shopping center? \_\_\_\_\_ yes \_\_\_\_\_ no

Contact Snellville Public Works to establish a sanitation account \_\_\_\_\_

**ACCOUNT NUMBER**

*I understand that I must obtain and maintain a sanitation account with the Snellville Public Works Department at all time while my business license account is active.*

\_\_\_\_\_  
Acknowledged By

\_\_\_\_\_  
Date

### **BOX 2 – Building Permit Applicants**

Construction Project Name \_\_\_\_\_ Permit # \_\_\_\_\_

Project Location (Address) \_\_\_\_\_ Suite \_\_\_\_\_

Scope of project (check all that apply) ☐ New Construction ☐ Interior Remodel/Finish  
☐ Demolition ☐ Site Work ☐ Other (explain) \_\_\_\_\_

State how the construction and demolition waste will be collected and type of container to be used: \_\_\_\_\_

*I acknowledge that on-site disposal of construction and demolition waste is prohibited, City inspection staff may: refuse to make inspections, issue Stop Work Orders, issue Citations for violations of Stop Work Orders; and refuse to approve Certificates of Completion/Occupancy for failure to comply with solid waste disposal laws.*

\_\_\_\_\_  
Acknowledged By

\_\_\_\_\_  
Date



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## SOIL EROSION & SEDIMENT CONTROL AFFIDAVIT

Subdivision or Project Name\_\_\_\_\_

Project Address\_\_\_\_\_City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Company Name\_\_\_\_\_

Company Address\_\_\_\_\_City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Company Phone\_\_\_\_\_Contact Person:\_\_\_\_\_Phone\_\_\_\_\_

My signature hereon signifies that I am the person responsible for compliance with the Soil Erosion & Sediment Control Ordinance. I acknowledge that City inspection staff may: refuse to make inspections, issue Stop Work Orders, and issue summons to appear in Recorder's Court for violations of erosion control requirements; and that I must use Best Management Practices (BMP's) to control soil erosion on my job site which includes at a minimum all of the following:

- Installation and regular maintenance of silt barriers (i.e. silt fences, hay bales, etc.) in those areas where water exits the job site;
- Installation and regular maintenance of a stone driveway entrance/exit pad to minimize the tracking of mud into the street;
- Removal of mud from the street or adjacent property immediately following any such occurrence;
- Maintenance and removal of mud from detention ponds and sediment basins.
- Conduct no land disturbing activities within 25 feet of the banks of any streams, lakes, wetlands, etc. (i.e. "state waters")
- Institute erosion control measures and practices as indicated on the approved Soil and Sediment Control Plan. Provide temporary vegetation and /or mulch in exposed critical areas.
- Submittals of form EC-1 on a weekly basis every Friday before 5:00 p.m.

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Title



## BUILDING INSPECTIONS

### GENERAL CONTRACTORS ARE REQUIRED TO CALL IN ALL INSPECTIONS

Building permit cards must be placed on each lot or construction site visible from the street and attached to a weatherproof structure a minimum of 5' above ground.

Erosion control measures must be in place and properly maintained before any inspections will be made.

Inspections are typically performed Monday, Wednesday and Friday unless closed for the Holiday. The Building Inspector requires all inspections to be called in the day before you wish to receive the inspection by 4:00 p.m.

Call the Department of Planning and Development at 770-985-3512 or 770-985-3514 to schedule. Do not leave inspections on the voicemail.

Requested inspections that are not ready for inspections that are not ready for inspection when the Building Inspector arrives or which do not successfully pass requiring a re-inspection are subject to re-inspect fees, which must be paid before scheduling the next inspection. The following fee structure applies to failed inspections;

1 <sup>st</sup> re-inspection fee	\$50.00	4 <sup>th</sup> re-inspection fee	\$125.00
2 <sup>nd</sup> re-inspection fee	\$75.00	5 <sup>th</sup> re-inspection fee	\$150.00
3 <sup>rd</sup> re-inspection fee	\$100.00	subsequent re-inspections	\$150.00

Subcontractor Affidavits for Plumbing, Electrical, and HVAC must be in our office prior to scheduling of the appropriate inspections.

Third party inspections must be pre-approved by the Building Inspector in advance of the inspection. The inspector will mark the inspection and result on the yellow permit card.

Upon successfully passing the building final for C.O. inspection, and any other additional requirements, a Certificate of Occupancy shall be issued, provided all fees have been paid in full. Commercial remodels and new commercial buildings are required to provide the Fire Safety Certificate of Occupancy to Planning & Development **before** receiving the Building Certificate of Occupancy.





## **SUBCONTRACTOR AFFIDAVIT**

**CITY OF SNELLVILLE DEPARTMENT  
OF PLANNING & DEVELOPMENT**  
**2342 OAK ROAD, 2<sup>ND</sup> FLOOR, SNELLVILLE, GA**  
**30078 (770) 985-3513 / (770) 985-3514**  
[www.snellville.org](http://www.snellville.org)

### **GENERAL CONTRACTOR SHALL CALL IN ALL INSPECTIONS**

This form must be completed, signed and submitted to the Department of Planning & Development before work may commence. Call (770) 985-3513 at least 24-hours prior to inspection request.

**MAIL OR HAND DELIVER COMPLETED FORM WITH A COPY OF THE CURRENT BUSINESS LICENSE, PROFESSIONAL STATE LICENSE AND DRIVER'S LICENSE.**

GENERAL CONTRACTOR: \_\_\_\_\_ PERMIT # \_\_\_\_\_

JOB SITE ADDRESS: \_\_\_\_\_ LOT / BLOCK: \_\_\_\_\_

SUBDIVISION / PROJECT NAME: \_\_\_\_\_

THIS IS TO CERTIFY THAT I WILL BE RESPONSIBLE FOR SUBCONTRACTORS PERFORMING:

☐ ELECTRICAL    ☐ LOW-VOLTAGE    ☐ HEATING & AIR    ☐ PLUMBING

PLEASE CHECK THE TYPE OF STATE LICENSE HELD AND BEING USED FOR THIS JOB:

- |   |   |
|---|---|
| <input type="checkbox"/> Electrical Contractor Class I      | <input type="checkbox"/> Electrical Contractor Class II (Unrestricted)      |
| <input type="checkbox"/> Master Plumber Class I             | <input type="checkbox"/> Master Plumber Class II (Unrestricted)             |
| <input type="checkbox"/> Conditioned Air Contractor Class I | <input type="checkbox"/> Conditioned Air Contractor Class II (Unrestricted) |
| <input type="checkbox"/> Low-Voltage Contractor Class I     | <input type="checkbox"/> Low-Voltage Contractor Class II (Unrestricted)     |

I certify that I am experienced in the classification above and I will comply with all codes and ordinances adopted by the City of Snellville that pertain to the construction of this structure. 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 have been notified, in writing, of any change.

SUBCONTRACTOR COMPANY NAME \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ OCCUPATION TAX # OR BUSINESS LICENSE #) \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ ISSUING AUTHORITY: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

STATE PROFESSIONAL LICENSE #: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

SUBCONTRACTOR SIGNATURE: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

**MAIL OR HAND DELIVER WITH A COPY OF THE CURRENT BUSINESS LICENSE,  
STATE PROFESSIONAL LICENSE AND DRIVER'S LICENSE OF CARD HOLDER.**