



FAIRBURN CITY HALL
56 MALONE ST
FAIRBURN, GA 30213
(770)964-2244
Fax (770)306-6919

Permit # 23-070
Date: 3/3/23

REPAIRS/ALTERATIONS PERMIT APPLICATION

This is not a permit, and no work will be started until the permit is issued.

Application is hereby made according to the laws and ordinances of the City of Fairburn for a permit to erect/alter and use a structure as described herein or shown on accompanying plan and specification, to be located as shown on accompanying plot plan and if same is granted, agree to conform to all laws and ordinances regarding same.

Job Location Mary Erna dr Subdivision _____ Lot # 570
Property Owner: Emmanuel Perez 570 Zoning Classification _____
Type of plans submitted _____ Construction to be started no later than _____
Estimated Building Cost: \$ 18,000
Describe work being done: Replacing damages of Siding / Roofing / end porches.

Width of Lot:	<u>N/A</u>	Width of Building:	<u>N/A</u>
Depth of Lot:	<u>N/A</u>	Length of Building:	<u>N/A</u>
Type of Sewage:	<u>N/A</u>	Total Floor Area:	<u>N/A</u>
Material of Roof:	<u>Shingles</u>	Heated Floor Area:	<u>N/A</u>
Walls- Siding (circle)	<u>WOOD</u> COMBINATION <u>SIDING</u> STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	

General Contractor: Emmanuel Perez GA Lic #: X
Address: 570 Mary Erna dr Fairburn, GA, 30213
Phone Number 678-724-453 Cell #: 678-726-8667

Subcontractors:

Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

USE OF SUBS OTHER THAN LISTED IN CONJUNCTION WITH THIS PERMIT REQUIRES FORMAL AMENDMENT OF THE PERMIT AND PRIOR APPROVAL OF THE CITY. FAILURE TO SECURE MAY RESULT IN STOP-WORK ORDER, FINE AND/OR OTHER MEASURES, INCLUDING REVOCATION OF PERMIT AND/OR PROBATIONARY PERIOD PRIOR TO APPROVAL OF SUBSEQUENT PERMITS FOR BOTH THE CONTRACTOR AND UNAUTHORIZED SUB-CONTRACTOR.

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 3 MONTHS AT ANY TIME AFTER WORK IS STARTED.

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 work performed under this permit will be complied with whether specified herein or not. The granting of a Building 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 related requirements.

CONTRACTOR/OWNER SIGNATURE: Emmanuel Perez DATE 3-3-23

Plan Approval _____ Permit Approval _____ Date _____

TOTAL PERMIT FEE: \$475.00 * Double Fee *

For Inspections Call 770-964-2244 ext. 401

Permit: \$480.00 1-Admin Fee: \$25.00

RECEIVED
 JAN 24 2023



FAIRBURN CITY HALL
 56 MALONE ST
 FAIRBURN, GA 30213
 (770)964-2244
 Fax (770)306-6919

BY:

Permit # 23-071
 Date: 3/7/23

HVAC PERMIT APPLICATION

Notice: This form must be completed, signed and submitted before work may commence.

Property Address: 319 Rivertown Rd, Fairburn, Ga 30213

Property Owner: Anthony Jacobs, Jr

HVAC Contractor: Reliable Heating and Air/Charles Austin Master License # CN210318

Address of Contractor: 1305 Chastain Rd, STE 500, Kennesaw, Telephone #: 770-594-9969

Heating Units		Refrig/AC Units	
# of Units	1	# of Units	1
Name	Daikin	Name	Daikin
Model #	DM96VC1005C	Model #	DX17VSS60
BTU	100k	Tons	5
Heat Loss		Heat Gain	
CFM		CFM	

Fans		Grease Hoods	
# of Units		# of Units	
H.P.		Sq. Feet	
CFM		Size of Vent	
		CFM Required	

Gas Pipe		Gas Range Outlets	
# of Units		# of Outlets	
Total BTU of Pipe:			

Briefly Summarize the Job: Replacing heating and cooling system.

(Estimated Job Cost) \$6600.00 (Permit Fee) \$135.00

Signature of Applicant: Bony Parrish Date: _____

For all inspections call (770) 964-2244 ext 401. Inspections will be performed within 24 hours of request, excluding weekends and holidays. Re-inspection fees: \$50.00/100.00/150.00. Late permits subject to increased fees.

Permit: \$110.00 / Admin fee: \$25.00



City of Fairburn Building Department
26 West Campbellton Street
Fairburn GA. 30213

Permit # 23-072

Date: 3/06/2023

Electric, Mechanical and Plumbing Permit Application

Property Owner: Trent Wiens
Location Address: 592 Fayetteville Rd Fairburn, GA 30213
Contractor: KD Electric
Address: 5355 Haverford mill cove Lilburn, GA 30047 Email: Kd@kdelectricservices.com
Street City, ZIP
Phone#: 678 480 4724 License#: EN216602

Information on Project: (All That Apply)

Commercial Residential (1 or 2-Family Dwelling)

System Modifications

Electrical Mechanical Plumbing Water/Sewer
 Electric Service New service Upgrade Service Repair Service
Amps. _____ Utility Co. _____

Mechanical Change Out New Mechanical Low Voltage New Electric Circuits
 Plumbing Repair New Plumbing Water Heater Gas Service New Gas Piping
 Other

Detail of Work: I am doing a service upgrade/ smoke detectors/ AFCI and GFCI breakers /
updating grounding system and surge protection.

Estimated Construction Cost \$10,500 Permit Fee \$ 155.00

Permit: \$130.00 | Adm Fee: \$25.00

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. THE GRANTING OF AN ELECTRIC, MECHANICAL OR PLUMBING 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 RELATED REQUIREMENTS. LATE PERMITS ARE SUBJECT TO INCREASED FEES. THIS PERMIT BECOMES NULL AND VOID IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS STARTED.

CONTRACTOR SIGNATURE: kent diap
This is to certify that I will personally supervise this installation

DATE: 3/06/2023



City of Fairburn Building Department
26 West Campbellton Street
Fairburn GA. 30213

Permit # 23-073

Date: 3/10/23

Electric, Mechanical and Plumbing Permit Application

Property Owner: DCT South Creek Eagles Landing LLC

Location Address: 1555 Oakley Industrial Blvd Fairburn GA 30213

Contractor: Phillips Electrical Mechanical

Address: 4912 Summer OAK Dr Burford GA 30518 Email: JScoggins@Phillipselectrical.com
Street City, ZIP

Phone#: 678-546-3799 License#: 001984
478 319 6089

Information on Project: (✓ All That Apply)

Commercial Residential (1 or 2-Family Dwelling)

System Modifications

Electrical Mechanical Plumbing Water/Sewer
 Electric Service New service Upgrade Service Repair Service
Amps. _____ Utility Co. _____

Mechanical Change Out New Mechanical Low Voltage New Electric Circuits
 Plumbing Repair New Plumbing Water Heater Gas Service New Gas Piping
 Other

Detail of Work: We will install 6 30 Amp 480V 3phase circuits to supply power to 9 Dock Locks with Levelers. Connections will be made to each control box with conduit and conductors.

Estimated Construction Cost \$22,330 Permit Fee \$215.00

Permit: \$190.00 Admin Fee: \$25.00

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CONTRACTOR SIGNATURE: [Signature]
This is to certify that I will personally supervise this installation

DATE: 3-1-2023



FAIRBURN CITY HALL
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MAR 08 2023

Permit # 23-074
Date: 3/14/23

HVAC PERMIT APPLICATION

Notice: This form must be completed, signed and submitted before work may commence.

Property Address: 5900 Bluegrass Vw Fairburn GA 30213

Property Owner: Wayne Houston

HVAC Contractor: American Residential Services Master License # CN210022

Address of Contractor: 5238 Royal Woods Pkwy Ste 190 Tucker Telephone #: 470-843-6001

Heating Units		Refrig/AC Units	
# of Units	1	# of Units	1
Name	Rheem	Name	Rheem
Model #	A-IR-7D1BB	Model #	A-IR-7D1BB
BTU		Tons	5
Heat Loss		Heat Gain	
CFM		CFM	

Fans		Grease Hoods	
# of Units		# of Units	
H.P.		Sq. Feet	
CFM		Size of Vent	
		CFM Required	

Gas Pipe		Gas Range Outlets	
# of Units		# of Outlets	
Total BTU of Pipe:			

Briefly Summarize the Job: Replace HAVC System with 5.0 Ton 16 SEER 80 AFUE Gas Heat Split System - Two

(Estimated Job Cost) \$15,000.00 (Permit Fee) \$ 180.00

Signature of Applicant: [Signature] Date: 3/8/2023

For all inspections call (770) 964-2244 ext 401. Inspections will be performed within 24 hours of request, excluding weekends and holidays. Re-inspection fees: \$50.00/100.00/150.00. Late permits subject to increased fees.

Permit Fee: \$ 180.00 / Admin Fee: \$ 25.00



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RECEIVED
MAR 08 2023
BY:

Permit # 23-075
Date: 3/14/23

HVAC PERMIT APPLICATION

Notice: This form must be completed, signed and submitted before work may commence.

Property Address: 4048 Olde Glen Cv Fairburn GA 30213

Property Owner: Tyana Hanks

HVAC Contractor: American Residential Services Master License # CN210022

Address of Contractor: 5238 Royal Woods Pkwy Ste 190 Tucker Telephone #: 470-843-6001

Heating Units		Refrig/AC Units	
# of Units		# of Units	1
Name		Name	Rheem
Model #		Model #	A-IR-1B1BA
BTU		Tons	1.5
Heat Loss		Heat Gain	
CFM		CFM	

Fans		Grease Hoods	
# of Units		# of Units	
H.P.		Sq. Feet	
CFM		Size of Vent	
		CFM Required	

Gas Pipe		Gas Range Outlets	
# of Units		# of Outlets	
Total BTU of Pipe:			

Briefly Summarize the Job: Replace HAVC System with 1.5 Ton 14 SEER 80 AFUE Gas Heat Split System

(Estimated Job Cost) \$9,058.00 (Permit Fee) \$150.00

Signature of Applicant: *Tyana Hanks* Date: 3/8/2023

For all inspections call (770) 964-2244 ext 401. Inspections will be performed within 24 hours of request, excluding weekends and holidays. Re-inspection fees: \$50.00/100.00/150.00. Late permits subject to increased fees.

Permit: \$125.00 / Admin fee: \$25.00



FAIRBURN CITY HALL
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RECEIVED
MAR 08 2023

Permit # 23-076
Date: 3/14/23

HVAC PERMIT APPLICATION

Notice: This form must be completed, signed and submitted before work may commence.

Property Address: 6724 Rivertown Rd Fairburn GA 30213
 Property Owner: Robert & Jattie Jones
 HVAC Contractor: American Residential Services Master License # CN210022
 Address of Contractor: 5238 Royal Woods Pkwy Ste 190 Tucke Telephone #: 470-843-6001

Heating Units		Refrig/AC Units	
# of Units		# of Units	1
Name		Name	Rheem
Model #		Model #	A-IR-6DZAD
BTU		Tons	4
Heat Loss		Heat Gain	
CFM		CFM	

Fans		Grease Hoods	
# of Units		# of Units	
H.P.		Sq. Feet	
CFM		Size of Vent	
		CFM Required	

Gas Pipe		Gas Range Outlets	
# of Units		# of Outlets	
Total BTU of Pipe:			

Briefly Summarize the Job: Replace HAVC System with 4.0 Ton 16 SEER AC Condenser/Coil
 (Estimated Job Cost) \$9,425.00 (Permit Fee) \$150.00
 Signature of Applicant: [Signature] Date: 3/8/2023

For all inspections call (770) 964-2244 ext 401. Inspections will be performed within 24 hours of request, excluding weekends and holidays. Re-inspection fees: \$50.00/100.00/150.00. Late permits subject to increased fees.

Permit: \$125.00 / Admin fee: \$150.00



FAIRBURN CITY HALL
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RECEIVED
MAR 07 2023

Permit # 23-077
Date: 3/15/23

FENCE PERMIT APPLICATION

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Job Location 6633 Rivertown Rd Subdivision _____ Lot # _____
 Property Owner: Horacio Martinez Zoning Classification _____
 Type of plans submitted _____ Construction to be started no later than March 20
 Estimated Building Cost: \$ 10,000
 Describe work being done: Fence along whole property line

Width of Lot:	<u>250ft</u>	Height of Fence:	<u>6ft Rear and side of home</u>
Depth of Lot:	<u>260ft / 290ft</u>		<u>4ft Front/side (Lake Esther)</u>
Material of Fence:			
<u>1x6</u>	<u>Picket 6ft</u>		
<u>4x4</u>	<u>Masonry Bricks</u>		

General Contractor: Horacio Martinez (Myself) Bus Lic #: _____
 Address: _____
 Phone Number 678-551-8578 Cell #: _____

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An accurate up-to-date survey of property showing the proposed fence location must be submitted with this application.

Has Home Owner's Association approval been obtained? Yes ___ No ___ N/A
 Proof of approval must be attached; preferably, a plan stamped and signed by HOA representative.

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 work performed under this permit will be complied with whether specified herein or not. The granting of a Building 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 related requirements.

CONTRACTOR/OWNER SIGNATURE: Plan pbb DATE 2-23-23

Plan Approval _____ Permit Approval [Signature] Date _____

TOTAL PERMIT FEE: \$100.00

Reviewed
MAR 10 2023
for code compliance

*If not approved, reason for denial: _____



FAIRBURN CITY HALL
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Permit # 23-078
Date: 3/20/23

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Job Location AL GREENWOOD ST Subdivision _____ Lot # _____
Property Owner: SHANTISA FULGHAM Zoning Classification R
Type of plans submitted _____ Construction to be started no later than 03/20/23
Estimated Building Cost: \$ 23,059.00
Describe work being done: ROOF REPLACEMENT / PAINT

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	
Type of Sewage:		Total Floor Area:	
Material of Roof:	<u>SHINGLE</u>	Heated Floor Area:	
Walls- Siding (circle)	WOOD COMBINATION SIDING STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	

General Contractor: ROYAL HOMES GA Lic #: 2022196824
Address: 950 HERBERTSON RD LAWRENCEVILLE, 30044
Phone Number 404 667 0877 Cell #: _____

Subcontractors:

Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

USE OF SUBS OTHER THAN LISTED IN CONJUNCTION WITH THIS PERMIT REQUIRES FORMAL AMENDMENT OF THE PERMIT AND PRIOR APPROVAL OF THE CITY. FAILURE TO SECURE MAY RESULT IN STOP-WORK ORDER, FINE AND/OR OTHER MEASURES, INCLUDING REVOCATION OF PERMIT AND/OR PROBATIONARY PERIOD PRIOR TO APPROVAL OF SUBSEQUENT PERMITS FOR BOTH THE CONTRACTOR AND UNAUTHORIZED SUB-CONTRACTOR.

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CONTRACTOR/OWNER SIGNATURE: _____ DATE 03/20/23

Plan Approval _____ Permit Approval _____ Date _____

TOTAL PERMIT FEE: \$325.00 x 1/2 Admin Fee

For Inspections Call 770-964-2244 ext. 401

Permit: \$300.00 / Admin Fee: \$25.00



FAIRBURN CITY HALL
56 MALONE ST
FAIRBURN, GA 30213
(770)964-2244
Fax (770)306-6919

RECEIVED
MAR 20 2023

BY:

Permit # 23-079
Date: 3/20/23

REPAIRS/ALTERATIONS PERMIT APPLICATION

This is not a permit, and no work will be started until the permit is issued.

Application is hereby made according to the laws and ordinances of the City of Fairburn for a permit to erect/alter and use a structure as described herein or shown on accompanying plan and specification, to be located as shown on accompanying plot plan and if same is granted, agree to conform to all laws and ordinances regarding same.

Job Location 6770 VIRGIN B SMITH Subdivision _____ Lot # _____
Property Owner: ANTONIO CASTILLO Zoning Classification _____
Type of plans submitted _____ Construction to be started no later than _____
Estimated Building Cost: \$ 1500
Describe work being done: I FIX My porche and Ebrity need done

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	
Type of Sewage:		Total Floor Area:	
Material of Roof:		Heated Floor Area:	
Walls- Siding (circle)	WOOD COMBINATION SIDING STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	

General Contractor: HOWARD GA Lic #: _____
Address: 6770 VIRGIN B SMITH RD. FAIRBURN
Phone Number 404-421-4498 Cell #: _____

Subcontractors:

Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

USE OF SUBS OTHER THAN LISTED IN CONJUNCTION WITH THIS PERMIT REQUIRES FORMAL AMENDMENT OF THE PERMIT AND PRIOR APPROVAL OF THE CITY. FAILURE TO SECURE MAY RESULT IN STOP-WORK ORDER, FINE AND/OR OTHER MEASURES, INCLUDING REVOCATION OF PERMIT AND/OR PROBATIONARY PERIOD PRIOR TO APPROVAL OF SUBSEQUENT PERMITS FOR BOTH THE CONTRACTOR AND UNAUTHORIZED SUB-CONTRACTOR.

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CONTRACTOR/OWNER SIGNATURE: Antonio Castillo DATE 3-20-23

Plan Approval Bin Permit Approval Bin Date _____

TOTAL PERMIT FEE: \$325.00

For Inspections Call 770-964-2244 ext. 401

Reviewed
For Code Compliance
By Bin Date 3/20/23

Permit: \$300.00 / Admin Fee: \$25.00



FAIRBURN CITY HALL
56 MALONE ST
FAIRBURN, GA 30213
(770)964-2244
Fax (770)306-6919

RECEIVED
MAR 07 2023

BY:

Permit # 23-080

Date: 1/6/23

FENCE PERMIT APPLICATION

This is not a permit, and no work will be started until the permit is issued.

Application is hereby made according to the laws and ordinances of the City of Fairburn for a permit to erect/alter and use a structure as described herein or shown on accompanying plan and specification, to be located as shown on accompanying plot plan and if same is granted, agree to conform to all laws and ordinances regarding same.

Job Location 2010 RIVERA G. FAIRBURN, GA Subdivision ENCLAVE @ BURNHAM LAKE Lot # 93
 Property Owner: SAMUEL FLEMING Zoning Classification RESIDENTIAL
 Type of plans submitted FENCE Construction to be started no later than ASAP
 Estimated Building Cost: \$ 5,000 K.
 Describe work being done: BACKYARD FENCE.

Width of Lot:		Height of Fence:	<u>6 FEET</u>
Depth of Lot:			
Material of Fence:	<u>PINE WOOD</u>		

General Contractor: THE SWAIN GROUP ISRAEL SWAIN Bus Lic #: 83-1185282
 Address: 7260 WEBER STREET ATLANTA, GA 30349
 Phone Number _____ Cell #: 770 896 6878

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An accurate up-to-date survey of property showing the proposed fence location must be submitted with this application.

Has Home Owner's Association approval been obtained? Yes No _____ N/A _____
 Proof of approval must be attached; preferably, a plan stamped and signed by HOA representative.

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 work performed under this permit will be complied with whether specified herein or not. The granting of a Building 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 related requirements.

CONTRACTOR/OWNER SIGNATURE: _____ DATE _____

Plan Approval _____ Permit Approval Bui Date Reviewed

TOTAL PERMIT FEE: \$100.00

MAR 10 2023

*If not approved, reason for denial: _____ for code compliance



FAIRBURN CITY HALL
56 MALONE ST
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(770)964-2244
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RECEIVED
JAN 31 2023

Permit # 23-081
Date: _____

BY:

**COMMERCIAL
BUILDING PERMIT APPLICATION**

This is not a permit, and no work will be started until the permit is issued.

Application is hereby made according to the laws and ordinances of the City of Fairburn for a permit to erect/alter and use a structure as described herein or shown on accompanying plan and specification, to be located as shown on accompanying plot plan and if same is granted, agree to conform to all laws and ordinances regarding same.

Property Owner: Clarion Partners Job Location Address: 7350 Graham Rd Fairburn, GA
Project Name DHL Lot # _____ Zoning District _____
General Contractor: Lewis General Contractors GA Lic #: RL00000211
Address: PO Box 1062 TYRME, GA 30290
Phone Number 404-759-0702 Cell #: _____ Fax #: _____

Width of Lot:		Heated Floor Area:	<u>4,000</u>
Lot Size (sq. ft.)		Total Floor Area:	<u>4,000</u>
Front Yard Set-Back		Side Yard Set-Back	
Check One		Sewage <input checked="" type="checkbox"/>	Septic <input type="checkbox"/>
Exterior Material			
Estimated Cost to Build: \$	<u>200,000</u>		

Date of Mayor & Council Approval		LDP # & Date of Approval	
----------------------------------	--	--------------------------	--

Subcontractors: COMMERCIAL TRADES MUST BE PERMITTED BEFORE WORK BEGINS.

Electrical	<u>Binkley Electric</u>	Phone:	<u>678-850-0345</u>
Plumbing	<u>Ross Plumbing</u>	Phone:	<u>770-960-6463</u>
HVAC	<u>Air Logic</u>	Phone:	<u>770-870-7415</u>

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. Proof of license is required.

Trade Permits:

Trade	Permit #	Date	Trade	Permit #	Date
Electric			Other		
HVAC			Other		
Plumbing			Other		
Other			Other		

Additional Plan Review
Information Required
Please submit revisions or information
requested and a commentary
requesting review comments.
Date: 2/11/23

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CONTRACTOR/OWNER SIGNATURE: [Signature] DATE 2/31/23

Plan Approval [Signature] Permit Approval [Signature] Date 3/15/23

Temporary Pole	\$	Permanent Electric	\$
Water Tap (Based on size)	\$	Sewer Tap	\$
Utility Deposit	\$	Permit Fee	\$ <u>3,100.00</u>
Plan Review (45% of Permit Fee)	\$ <u>775.00</u>		

TOTAL AMOUNT PAID \$ 3,950.00 Fire Marshal: \$50.00
Admin Fee: \$25.00

Reviewed
MAR 15 2023
for code compliance



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RECEIVED
FEB 23 2023

BY:

Permit # 23-082
Date: 3/22/23

REPAIRS/ALTERATIONS PERMIT APPLICATION

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Job Location 604 Pinchurst Dr. Subdivision N/A Lot # 33
Property Owner: Randolph Clark Zoning Classification _____
Type of plans submitted Engineered Engineer Construction to be started no later than 1-30-23
Estimated Building Cost: \$ 97,023.64
Describe work being done: Interior repairs due to Fire/smoke damage in Garage. No structure Damage

Width of Lot:	<u>187'</u>	Width of Building:	<u>82'</u>
Depth of Lot:	<u>262'</u>	Length of Building:	<u>36'</u>
Type of Sewage:	<u>City sewer</u>	Total Floor Area:	<u>2100 sq Ft</u>
Material of Roof:	<u>Asphalt/shingle</u>	Heated Floor Area:	<u>2100 Sq Ft</u>
Walls- Siding (circle)	WOOD COMBINATION <u>(SIDING)</u> STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back	<u>92'</u>	Side Yard Set-Back	<u>55'</u>
Back Yard Set-Back	<u>85'</u>	Side Yard Set-Back	<u>33'</u>

General Contractor: All Restoration Solutions GA Lic #: RBQA006209
Address: 3700 Kennasaw S. Industrial Pkwy
Phone Number 678-945-0150 Cell #: 404-725-0083

Subcontractors:

Electrical	<u>Premier Electrical Services</u>	Phone:	<u>678-614-6119</u>
Plumbing	<u>Hey Dude Plumbing</u>	Phone:	<u>678-687-9284</u>
HVAC	<u>GA West Mechanical Services LLC</u>	Phone:	<u>678-848-2247</u>

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

USE OF SUBS OTHER THAN LISTED IN CONJUNCTION WITH THIS PERMIT REQUIRES FORMAL AMENDMENT OF THE PERMIT AND PRIOR APPROVAL OF THE CITY. FAILURE TO SECURE MAY RESULT IN STOP-WORK ORDER, FINE AND/OR OTHER MEASURES, INCLUDING REVOCATION OF PERMIT AND/OR PROBATIONARY PERIOD PRIOR TO APPROVAL OF SUBSEQUENT PERMITS FOR BOTH THE CONTRACTOR AND UNAUTHORIZED SUB-CONTRACTOR.

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 3 MONTHS AT ANY TIME AFTER WORK IS STARTED.

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 work performed under this permit will be complied with whether specified herein or not. The granting of a Building 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 related requirements.

CONTRACTOR/OWNER SIGNATURE [Signature] DATE 1/18/2023

Plan Approval [Signature] Permit Approval [Signature] Date _____

TOTAL PERMIT FEE: \$ 1,104.00

For Inspections Call 770-964-2244 ext. 401

Permit # 929.00

Additional Plan Review Information Required
Please submit revisions or information requested and a commentary

Reviewed
MAR 17 2023
for code compliance



FAIRBURN CITY HALL
56 MALONE ST
FAIRBURN, GA 30213
(770)964-2244
Fax (770)306-6919

RECEIVED
MAR 20 2023

Permit # 23-083
Date: 3/22/23

BY:

REPAIRS/ALTERATIONS PERMIT APPLICATION

This is not a permit, and no work will be started until the permit is issued.

Application is hereby made according to the laws and ordinances of the City of Fairburn for a permit to erect/alter and use a structure as described herein or shown on accompanying plan and specification, to be located as shown on accompanying plot plan and if same is granted, agree to conform to all laws and ordinances regarding same.

Job Location 7034 Preserve Parkway Fairburn GA 30212 Subdivision _____ Lot # _____
Property Owner: Sabrina Eaton Zoning Classification _____
Type of plans submitted Customer Contract Construction to be started no later than _____
Estimated Building Cost: \$ 11,763.82
Describe work being done: Tear off existing shingles and material down to decking, install new felt, ice/water, drip edge, and shingles

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	
Type of Sewage:		Total Floor Area:	
Material of Roof:		Heated Floor Area:	
Walls- Siding (circle)	WOOD COMBINATION SIDING STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	

General Contractor: (TRADE) KTM Roofing Company Inc GA Lic #: 48424
Address: 2536 Highway 138 East Stockbridge GA 30281
Phone Number 678-565-7663 Cell #: _____

Subcontractors:

Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

USE OF SUBS OTHER THAN LISTED IN CONJUNCTION WITH THIS PERMIT REQUIRES FORMAL AMENDMENT OF THE PERMIT AND PRIOR APPROVAL OF THE CITY. FAILURE TO SECURE MAY RESULT IN STOP-WORK ORDER, FINE AND/OR OTHER MEASURES, INCLUDING REVOCATION OF PERMIT AND/OR PROBATIONARY PERIOD PRIOR TO APPROVAL OF SUBSEQUENT PERMITS FOR BOTH THE CONTRACTOR AND UNAUTHORIZED SUB-CONTRACTOR.

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CONTRACTOR/OWNER SIGNATURE: Christop Russee DATE 3/20/23

Plan Approval _____ Permit Approval _____ Date _____
TOTAL PERMIT FEE: \$ 175.00

For Inspections Call 770-964-2244 ext. 401

Permit: \$150.00 | Admin Fee: \$25.00



FAIRBURN CITY HALL
56 MALONE ST
FAIRBURN, GA 30213
(770)964-2244
Fax (770)306-6919

RECEIVED
MAR 14 2023

Permit # 23-084
Date: 3/22/23

BY:

REPAIRS/ALTERATIONS PERMIT APPLICATION

This is not a permit, and no work will be started until the permit is issued.

Application is hereby made according to the laws and ordinances of the City of Fairburn for a permit to erect/alter and use a structure as described herein or shown on accompanying plan and specification, to be located as shown on accompanying plot plan and if same is granted, agree to conform to all laws and ordinances regarding same.

Job Location 106 Howell Avenue, Fairburn, Georgia 30213 Subdivision _____ Lot # _____
Property Owner: City of Fairburn Zoning Classification _____
Type of plans submitted Site plans, structural analysis Construction to be started no later than 5-17-2023
Estimated Building Cost: \$ 18000
Describe work being done: Modify ground-based and tower-mounted equipment on an existing tower

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	195'
Type of Sewage:		Total Floor Area:	
Material of Roof:		Heated Floor Area:	
Walls- Siding (circle)	WOOD COMBINATION SIDING STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	

General Contractor: AnSCO & Associates, LLC GA Lic #: 2022-6971
Address: 1220 Old Alpharetta Road, Ste 380, Alpharetta, GA 30005
Phone Number 770-827-4025 Cell #: 678-836-8938

Subcontractors:

Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

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CONTRACTOR/OWNER SIGNATURE: Robin Tyus Digitally signed by Robin Tyus
DN: cn=Robin Tyus, o=City of Fairburn, ou=Contractors
Date: 2023.03.15 11:22:18 -0500 DATE 3-9-2023

Plan Approval T Bin Permit Approval T Bin Date MAR 17 2023

TOTAL PERMIT FEE: \$475.00

Permit: \$ 300.00
Plan Review: \$ 150.00
Admin Fee: \$ 25.00

For Inspections Call 770-964-2244 ext. 401

for code compliance



FAIRBURN CITY HALL
 56 MALONE ST
 FAIRBURN, GA 30213
 (770)964-2244
 Fax (770)306-6919

Permit # 23-085
 Date: 3/24/23

REPAIRS/ALTERATIONS PERMIT APPLICATION

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Job Location 164 Fairhaven Trail Fairburn Subdivision _____ Lot # _____
 Property Owner: FUI of GA Zoning Classification _____
 Type of plans submitted _____ Construction to be started no later than _____
 Estimated Building Cost: \$ _____
 Describe work being done: Installing new roof.

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	
Type of Sewage:		Total Floor Area:	
Material of Roof:	<u>Asphalt Shingles</u>	Heated Floor Area:	
Walls- Siding (circle)	WOOD COMBINATION SIDING STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	

General Contractor: Pitts Home Repair GA Lic #: 42645
 Address: 50 Chimney Rise Ct. Stockbridge GA 30281
 Phone Number 678-565-1277 Cell #: 404-406-0378

Subcontractors:

Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

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CONTRACTOR/OWNER SIGNATURE: [Signature] DATE 3-24-23

Plan Approval _____ Permit Approval _____ Date _____

TOTAL PERMIT FEE: \$325.00

For Inspections Call 770-964-2244 ext. 401 or Donnie Peck

Permit: \$300.00 / Admin Fee: \$25.00



City of Fairburn Building Department
26 West Campbellton Street
Fairburn GA. 30213

Permit # 23-086

Date: 3/27/23

Electric, Mechanical and Plumbing Permit Application

Property Owner: William + Carlette Morrow
Location Address: 850 Buckingham Cove, Fairburn, GA 30213
Contractor: Nicholas Spina / Casteel Heating + Cooling
Address: 2218 Canton Rd Marietta GA 30066 Email: Permits@casteelair.com
Street City ZIP
Phone#: 678-501-6697 License#: CN21288

Information on Project: (All That Apply)

Commercial Residential (1 or 2-Family Dwelling)

System Modifications

Electrical Mechanical Plumbing Water/Sewer
 Electric Service New service Upgrade Service Repair Service
Amps. _____ Utility Co. _____

Mechanical Change Out New Mechanical Low Voltage New Electric Circuits
 Plumbing Repair New Plumbing Water Heater Gas Service New Gas Piping
 Other

Detail of Work: Replace (2) 70K Furnace, (2) 2.0 Ton A/C, (2) Coil

Estimated Construction Cost 21,000.00 Permit Fee \$ 210.00

Permit: \$ 185.00 / Admin Fee: \$ 25.00

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. THE GRANTING OF AN ELECTRIC, MECHANICAL OR PLUMBING 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 RELATED REQUIREMENTS. LATE PERMITS ARE SUBJECT TO INCREASED FEES. THIS PERMIT BECOMES NULL AND VOID IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS STARTED.

CONTRACTOR SIGNATURE: Nicholas Spina
This is to certify that I will personally supervise this installation

DATE: 3/27/23



City of Fairburn Building Department
26 West Campbellton Street
Fairburn GA. 30213

Permit # 23-087

Date: 3/27/23

Electric, Mechanical and Plumbing Permit Application

Property Owner: Ray Lozano
Location Address: 642 Sir Charles Dr, Fairburn, GA 30213
Contractor: Nicholas Spina / Casteel Heating + Cooling
Address: 2218 Canton Rd Marietta GA 30213 Email: Permits@castelair.com
Street City, ZIP
Phone#: 678-501-6692 License#: CR21288

Information on Project: (All That Apply)

- Commercial Residential (1 or 2-Family Dwelling)

System Modifications

- Electrical Mechanical Plumbing Water/Sewer
 Electric Service New service Upgrade Service Repair Service
Amps. _____ Utility Co. _____

- Mechanical Change Out New Mechanical Low Voltage New Electric Circuits
 Plumbing Repair New Plumbing Water Heater Gas Service New Gas Piping
 Other

Detail of Work: Replace 45K Furnace, 2.0 Ton A/C, + Coil

Estimated Construction Cost \$9,857.00 Permit Fee \$150.00

Permit: \$125.00 (Admin Fee): \$25.00

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. THE GRANTING OF AN ELECTRIC, MECHANICAL OR PLUMBING 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 RELATED REQUIREMENTS. LATE PERMITS ARE SUBJECT TO INCREASED FEES. THIS PERMIT BECOMES NULL AND VOID IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS STARTED.

CONTRACTOR SIGNATURE: Nicholas Spina
This is to certify that I will personally supervise this installation

DATE: 3/27/23



City of Fairburn Building Department
26 West Campbellton Street
Fairburn GA. 30213

Permit # 23-088

Date: 3/27/23

Electric, Mechanical and Plumbing Permit Application

Property Owner: Charity Cooper

Location Address: 6751 Jules Trc, Palmetto, GA 30268

Contractor: Nicholas Spina / Casteel Heating + Cooling

Address: 2218 Canton Rd, Marietta, GA 30066 Email: Permits@Casteelair.com

Phone#: 678-501-6692 License#: Cn211288

Information on Project: (All That Apply)

- Commercial
- Residential (1 or 2-Family Dwelling)

System Modifications

- Electrical
- Mechanical
- Plumbing
- Water/Sewer
- Electric Service
- New service
- Upgrade Service
- Repair Service

- Mechanical Change Out
- New Mechanical
- Low Voltage
- New Electric Circuits
- Plumbing Repair
- New Plumbing
- Water Heater
- Gas Service
- New Gas Piping
- Other

Detail of Work: Replace 90K Furnace, 4.0Ton A/C + Coil

Estimated Construction Cost \$16,321.00 Permit Fee \$188.00
Permits: \$160.00 / Admin Fee: \$28.00

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. THE GRANTING OF AN ELECTRIC, MECHANICAL OR PLUMBING 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 RELATED REQUIREMENTS. LATE PERMITS ARE SUBJECT TO INCREASED FEES. THIS PERMIT BECOMES NULL AND VOID IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS STARTED.

CONTRACTOR SIGNATURE: Nicholas Spina
This is to certify that I will personally supervise this installation

DATE: 3/27/23



26 West Campbellton Street
 Fairburn, GA 30213
 770-964-2244 FAX - 770-306-6919
 Ext: 401

Permit # 23-089
 Date: 3-28-23

REPAIRS/ALTERATIONS PERMIT APPLICATION

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Project Address: 6604 VIKLYN B Smith Road, Fairburn Subdivision _____ Lot # _____
 Property Owner: Victoria Turner Zoning Classification _____
 Type of plans submitted _____ Estimated Construction Cost: \$ 14,000
 Describe work: re-roof

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	
Type of Sewage:		Total Sq. Ft:	
Material of Roof:		Heated Sq. Ft:	
Walls- Siding (circle)	WOOD COMBINATION SIDING STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back	Side Yard Set-Back
Rear Yard Set-Back	

General Contractor: DT Chastain GA LIC #: 0471
 Address: 140 Shamrock Industrial Blvd, Tyrone GA 30290
 Phone: 7704860820

Subcontractors:

Electrical	Phone:
Plumbing	Phone:
HVAC	Phone:

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

USE OF SUBS OTHER THAN LISTED IN CONJUNCTION WITH THIS PERMIT REQUIRES FORMAL AMENDMENT OF THE PERMIT AND PRIOR APPROVAL OF THE CITY. FAILURE TO SECURE MAY, RESULT IN STOP-WORK ORDER, FINE AND/OR OTHER MEASURES, INCLUDING REVOCATION OF PERMIT AND/OR PROBATIONARY PERIOD PRIOR TO APPROVAL OF SUBSEQUENT PERMITS FOR BOTH THE CONTRACTOR AND UNAUTHORIZED SUB-CONTRACTOR.

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CONTRACTOR/OWNER SIGNATURE: Kristina Chastain DATE 3-28-2023

Plan Approval _____ Permit Approval _____ Date _____

PERMIT FEE TOTAL: \$325.00 Permit: \$300.00 * Double Fee *

Alana Price 770 770 770



FAIRBURN CITY HALL
56 MALONE ST
FAIRBURN, GA 30213
(770)964-2244
Fax (770)306-6919

Permit # 23-096
Date: 3/29/23

REPAIRS/ALTERATIONS PERMIT APPLICATION

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Job Location 25 Strickland Street Subdivision _____ Lot # _____
Property Owner: Asia Hudson Zoning Classification residential
Type of plans submitted _____ Construction to be started no later than 3/29/2023
Estimated Building Cost: \$ 9,983.78
Describe work being done: Remove & Replace existing Roof w/ 30yr Arch in the color Shakewood.

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	
Type of Sewage:		Total Floor Area:	
Material of Roof:		Heated Floor Area:	
Walls- Siding (circle)	WOOD COMBINATION SIDING STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	

General Contractor: Joseph2 Unlimited GA Lic #: 1501035376
Address: 3105 Sable Trail, Atlanta, GA 30349
Phone Number 770.783.5228 Cell #: _____

Subcontractors:

Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

USE OF SUBS OTHER THAN LISTED IN CONJUNCTION WITH THIS PERMIT REQUIRES FORMAL AMENDMENT OF THE PERMIT AND PRIOR APPROVAL OF THE CITY. FAILURE TO SECURE MAY RESULT IN STOP-WORK ORDER, FINE AND/OR OTHER MEASURES, INCLUDING REVOCATION OF PERMIT AND/OR PROBATIONARY PERIOD PRIOR TO APPROVAL OF SUBSEQUENT PERMITS FOR BOTH THE CONTRACTOR AND UNAUTHORIZED SUB-CONTRACTOR.

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CONTRACTOR/OWNER SIGNATURE: Terrell Taylor DATE 03/29/2023

Plan Approval _____ Permit Approval _____ Date _____

TOTAL PERMIT FEE: \$ 325.00

Permit: \$300.00 *Double fee*
Admin Fee: \$25.00

For Inspections Call 770-964-2244 ext. 401



FAIRBURN CITY HALL
56 MALONE ST
FAIRBURN, GA 30213
(770)964-2244
Fax (770)306-6919

RECEIVED
MAR 29 2023

BY:

Permit # 23-091

Date: 3/29/23

REPAIRS/ALTERATIONS PERMIT APPLICATION

This is not a permit, and no work will be started until the permit is issued.

Application is hereby made according to the laws and ordinances of the City of Fairburn for a permit to erect/alter and use a structure as described herein or shown on accompanying plan and specification, to be located as shown on accompanying plot plan and if same is granted, agree to conform to all laws and ordinances regarding same.

Job Location 15 Honey Suckle Lane, Fairburn Subdivision _____ Lot # _____
 Property Owner: TONY SHARP Zoning Classification _____
 Type of plans submitted _____ Construction to be started no later than _____
 Estimated Building Cost: \$ 12,892.06
 Describe work being done: RE-ROOF Replacement

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	
Type of Sewage:		Total Floor Area:	
Material of Roof:	<u>ASPHALT Shingle</u>	Heated Floor Area:	
Walls- Siding (circle)	<u>WOOD COMBINATION</u>	SIDING STUCCO STONE BRICK MASONARY BRICK	

Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	

General Contractor: Ridgeview Roofing Renovations LLC GA Lic #: 00073018
 Address: 2600 Bentley Rd SE, #806, Marietta, GA 30067
 Phone Number _____ Cell #: 404-662-9703

Subcontractors:

Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

USE OF SUBS OTHER THAN LISTED IN CONJUNCTION WITH THIS PERMIT REQUIRES FORMAL AMENDMENT OF THE PERMIT AND PRIOR APPROVAL OF THE CITY. FAILURE TO SECURE MAY RESULT IN STOP-WORK ORDER, FINE AND/OR OTHER MEASURES, INCLUDING REVOCATION OF PERMIT AND/OR PROBATIONARY PERIOD PRIOR TO APPROVAL OF SUBSEQUENT PERMITS FOR BOTH THE CONTRACTOR AND UNAUTHORIZED SUB-CONTRACTOR.

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CONTRACTOR/OWNER SIGNATURE: _____ DATE 03-29-2023

Plan Approval _____ Permit Approval _____ Date _____

TOTAL PERMIT FEE: \$1175.00

For Inspections Call 770-964-2244 ext. 401

Permit: \$ 150.00 / Admin Fee: \$ 25.00



FAIRBURN CITY HALL
56 MALONE ST
FAIRBURN, GA 30213
(770)964-2244
Fax (770)306-6919

Permit # 23-092
Date: 3/29/23

REPAIRS/ALTERATIONS PERMIT APPLICATION

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Job Location 30 APRILS COURT Subdivision _____ Lot # _____
 Property Owner: Josia Rockefeller Zoning Classification _____
 Type of plans submitted Re Roof Construction to be started no later than _____
 Estimated Building Cost: \$ 10,934
 Describe work being done: Removing Shingles, Installing Ice & water, Synthetic Belt, GAF Timberline HDZ Shingles

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	
Type of Sewage:		Total Floor Area:	
Material of Roof:		Heated Floor Area:	
Walls- Siding (circle)	WOOD COMBINATION SIDING STUCCO STONE BRICK MASONARY BRICK		

Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	

General Contractor: Shingle Magic Atlanta GA Lic #: 12682
 Address: 1005 Alderman dr Alpharetta GA 30005
 Phone Number 404-595-3905 Cell #: 404-561-4474

Subcontractors:

Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	

NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.

USE OF SUBS OTHER THAN LISTED IN CONJUNCTION WITH THIS PERMIT REQUIRES FORMAL AMENDMENT OF THE PERMIT AND PRIOR APPROVAL OF THE CITY. FAILURE TO SECURE MAY RESULT IN STOP-WORK ORDER, FINE AND/OR OTHER MEASURES, INCLUDING REVOCATION OF PERMIT AND/OR PROBATIONARY PERIOD PRIOR TO APPROVAL OF SUBSEQUENT PERMITS FOR BOTH THE CONTRACTOR AND UNAUTHORIZED SUB-CONTRACTOR.

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 3 MONTHS AT ANY TIME AFTER WORK IS STARTED.

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 work performed under this permit will be complied with whether specified herein or not. The granting of a Building 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 related requirements.

CONTRACTOR/OWNER SIGNATURE: [Signature] DATE 3/29/2023

Plan Approval _____ Permit Approval _____ Date _____

TOTAL PERMIT FEE: \$325.00 Double Fee \$300.00

For Inspections Call 770-964-2244 ext. 401 Admin Fee: \$25.00