

26 West Campbellton Street Fairburn, GA 30213 770-964-2244 Fax 770-306-6919 Permit # <u>22-385</u>
Date: <u>12/1/2</u>2

SWIMMING POOL PERMIT APPLICATION

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

Desirat Addison 3035 Section 5 - Long Latin
Project Address 3035 Broadwor Way, Faschurn Subdivision Lot #
Property Owner: Kenyun Robinson Zoning Classification Type of plans submitted Rol & Fence Estimated Construction Cost: \$ Construction
Width of Pool: Depth of Pool: Heated?: Material of Pool: Indoor or Outdoor: Above ground or In-ground: To The Count of Pool: The submit revision of pool: Above ground or In-ground: To The count of Pool: The submit revision of P
Width of Pool: 16' x 32'
Width of Pool: Depth of Pool: C' Depth of Pool: Depth of P
Heated?: Yes Yes No No dittion on or mention of the next of the ne
Material of Pool: Gunite Addition makes in the community of the communit
Indoor or Outdoor: Outdoor: Outdoor: Into write and som con Dates
Above ground or In-ground: In - ground
Width of Pool: Depth of Pool: Heated?: Material of Pool: Indoor or Outdoor: Above ground or In-ground: Front Set-Back Rear Set-Back Rear Set-Back Side Yard Set-Back HOA Approval Estimated construction cost. ### Lank Required ### Rear Set-Back Construction of St. Constructio
Front Set-Back Side Yard Set-Back addition Side Yard Set-Back
Rear Set-Back Side Yard Set-Back HOA Approval YES N/A
Contractor: Atlanta Pool Solutions Lic #: 010184
Address: 84 woods in 8 Shorps but \$, GA 30217
Phone Number 678 632 2217 Cell #: 678 873 5563
Subcontractors:
Electrical RANDY WI TWINK Phone: 404 429 7097
Plumbing NA Phone:
HVAC NIA Phone:
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 6 MONTHS AT ANY TIME
AFTER WORK IS STARTED.
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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: Reviewed DATE 11/2/22
Plan Approval Permit Approval NOV 29 Zubate
for code compliance
Plan Review Fee \$ 150,00 Permit Fee \$ 900 M
Plan Review Fee \$ 150.00 Permit Fee \$ 880.00
Permit Fec: \$ 705.00
TO MATERIAL POST OF



and if same is granted, agree to conform to all laws and ordinances regarding same.

Permit #	22-386
Date:	12/01/22

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 plan

Job Location 2035 Broad	noor Way Frinburn	_Subdivision		Lot	#
Property Owner: Kenyun (Robinson				
Type of plans submitted Pool	d Fence	Construction to	be starte	on d no later than	
Estimated Building Cost: \$	NIA				
Describe work being done: _	Pool Fence +n is	already in	place	Just needs	the
gotes change	sed to outward s	Swinging			
	T				
Width of Lot:		Height of Fence	:		
Depth of Lot:		6'			
Material of Fence:	Mood				
Sides of Front are	WOOD				
Boek in	Diuminom				
				800 PD 20	
General Contractor: Pt lav	ata Pool Solution	5 Bu	s Lic #:	22-010/84	
Addrage QU Dodske	an Shamshure	(-D			
Phone Number 370)67	18-873-5563	Cell # 678 2	373 55	(3	
Thore Number	0 10 000	OCII			
					Charles Andrew
THIS PERMIT BECOMES	S NULL AND VOID IF WOR	K OR CONSTRUCTION	ON AUTHO	RIZED IS NOT CO	MMENCED
WITHIN 6 MONTHS, OR IF CONST		SPENDED OR ABANI	ONED FOR	R A PERIOD OF 3 M	ONTHS AT
ANY TIME AFTER WORK IS STAR	TED.				
An accurate up-to-date s	survey of property s	howing the pro	nosed fo	ence location r	nust be
submitted with this applie		nowing the pro	posca ii	crice location i	naot bo
Submitted with this application	Cation.				
Haa Harra Orrinada Assasi	sation approval become	atainad2 Vaa	Mo	NI/A	
Has Home Owner's Associ	ation approval been of	otained? Yes	110	IV/A	
Proof of approval must	be attached; prefer	rabiy, a pian s	stamped	and signed t	у поа
representative.					
I hereby certify that I hav	e read and examined	this application	and kn	ow the same to	be true
and correct. All provision	ons of laws and ordi	nances governi	ng work	performed un	der this
permit will be complied	with whether specifi	ed herein or no	ot. The	granting of a l	Building
Permit does not presume	e to give authority to	violate or cand	el the p	rovisions of ar	y other
state or local law regulati					
State of recal fair regulars	g				/
CONTRACTOR/OWNER SIG	NATURE:			DATE 10/20	Olda
Plan Approval	Permit Appr	oval Mu	21	Date 1/2	7/22
111111111111111111111111111111111111111				1	
TOTAL PERMIT FEE: \$100.00					
*16	-utal				
*If not approved, reason for de	eniai:				



Property Owner: Raymond / Carolina Handling

Project Name Carolina Handling Rack Storage



Job Location Address:

92 Howell Avenue

COMMERCIAL **BUILDING PERMIT APPLICATION**

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

Project Name	Project Name Carolina Handling Rack Storage Lot # Zoning District									
General Contra	actor: B&M	Services				GA Lic	#: N/	′A		
Address: 2303 Westland Way Acworth, GA 30102										
Phone Number	678.592-58	367	Cell	#:		Fax #	:			
Width of Lot:					Heated	Floor Are	a:			
Lot Size (sq. f	t.)				Total F	loor Area:		1,52	4	
Front Yard Se	t-Back		Side Yard Set-Back			Rear	Yard	Set	-Back	
Check One Sewage / Septic										
Exterior Mater	ial N/A		u .	0.						
Estimated Cost	t to Build: \$	2,000.00	7 (e)	760						
Date of Mayor	& Council			LDP	# & Da	te of				
Approval				Аррі	oval					
						AND THE RESERVE				
Subcontractor		IERCIA	L TRADES MU	JST BE PE	RMITTE		E WO	RK	BEGIN	S.
Electrical	N/A					Phone:				
Plumbing	N/A					Phone:				
HVAC	N/A					Phone:				
NOTE: All Sub-Cont		e State Lice	ensed And Must Per	rmit Each Job P	ersonally. F	Proof of license	e is requ	ıired.		
Trade Permits		14 44	D. (-	Tee	ade					Date
Trade	Peri	mit#	Date				Permi	it#		Date
Electric				Oth						
HVAC				Oth	33,001.00					
Plumbing				Oth	ner					
Other				Oth	ner					
				•						
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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	R/OWNER	SIGNAT	URE:	Devot		•		_ D/	ATE	.28.22
		A STATE OF THE STA			T.					e de la constant
Plan Approval	10	~	Permit	t Approval	SIL			C	ate	W 2 9 2022
Temporary Pole		\$		Permanent l	Electric			\$	141	- miance
Water Tap (Based	d on size)	\$		Sewer Tap				\$	- FOT C	ode compliance
Utility Deposit	of Downit E	\$	335-00	Permit Fee			;	\$ (010.0	15
Plan Review (45%	o or Permit Fe	ee) \$	202.00	Admm 1	cc. \$2	3				
TOTAL AMOUN	T PAID	1,0	80.00_	Fin M	wited:	\$50				



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

Date: 11/21/2022

Electric, Mechanical and Plumbing Permit Application

Property Owner: Joseph K. McGorrey Native Development Group LLC 404-966-8484 jmcgorrey@nativedevelopmentgroup.co
Location Address: 92 Howell Ave
Contractor: Sage Security Solutions LLC
Address: 255 Houston Rd Troutman 28166 Email: service@sagesecuritysolutions.com Street City, ZIP Phone#: 704-799-8652 License#: LVA206150
<u>Information on Project:</u> (✓ All That Apply)
☐ 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: Low voltage installation of burglar alarm and access control
Estimated Construction Cost 36,000.00 Permit Fee \$ 285.60
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 PERFOMANCE 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: Philip Morgart DATE: 11/21/2022

This is to certify that I will personally supervise this installation





Permit #

COMMERCIAL

BUILDING PERMIT APPLICATION

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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.

COLUMN TO SELECT		A Marie World									
Property Owner: Clarion Partners c/o Avison Young Job Location Address: Provided Separately											
Project Nam	í	Zoning District									
	ntractor: 3D S	ign Service:	s, INc.			G	A Lic#	: Ha	II Co. 003	4233	
Address: 323	33 Lake Road Cir	cle, Gaines	ville GA 30501								
	ber 770-294-12			I#: 770-294-1	283		Fax #:				
Width of Lo						ed Floo	r Area	:			, _
Lot Size (so				į.	Total	Floor	Area:				
Front Yard			Side Yard Se	et-Back			Rear \	'ard	Set-B	ack	
Check One				Sewag	je		Sep	tic			
Exterior Ma	terial					Alumir	num				
Estimated C		\$ 137,271.	70								
Date of May	or & Council			∮ LDF	# & D	Date of					
Approval				App	roval						
Subcontrac	tors: COM	MERCIA	L TRADES M	UST BE PE	RMITT			WO	RK BE	GINS	5,
Electrical	N/A						one:				
Plumbing	N/A						one:				
HVAC	N/A						one:				
		Be State Lie	censed And Must Pe	ermit Each Job F	ersonally	y. Proof o	f license i	s requ	uired.		
Trade Perm		.4 11		T	- d o	Т					Date
Trade	Pe	rmit #	Date		ade		Pe	ermi	t #		Date
Electric		N/A			her					_	
HVAC		N/A			her						
Plumbing		N/A		Ot	her						
Other		N/A		Ot	her						
				L							
Mark State of the				第4 基本基础 2018	SE CONTRA			A NA			
THIS F	PERMIT BECOME	ES NULL AI	ND VOID IF WORK DED OR ABANDON	OR CONSTRU	CTION AU	UTHORIZ	ED IS NO	T CC	MMENCI F AFTER	ED WIT	HIN 6 MONTHS, C (IS STARTED.
I hereby certif	y that I have i	ead and	examined this a	pplication an	know	the san	e to be	true	and co	rrect.	All provisions
laws and ordin	nances govern	iing work t does no	performed unde ot presume to giv	er this permit	wiii be d	compile or can	a with w	netn rovis	er spec sions of	anv o	erein or not. The
law regulating	construction	or the per	formance of rela	ited requirem	ents.	or our	oci tilo p		,,,,,,,	uny o	inor otato or roo
law regulating construction or the performance of related requirements.											
CONTRACTOR/OWNER SIGNATURE: Ray W WAY DATE 11-15-2022											
				/	(1)	Re	viewed				
Plan Approv	val Me	1	Permi	it Approval	K	180		2022	Date	e	
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Temporary Po	le	\$		Permanent	Electric		le comp	llan	se.		
Water Tap (Ba	sed on size)	\$		Sewer Tap		for con	10 00. 1			00	1
Utility Deposit		\$ Eco\ \$	E91 00	Permit Fee					5 1,1	72 -	aO
Plan Review (4	15% Of Permit	Fee) \$	586.00	Admin	Fec:	\$ 25	.co				
TOTAL AMO	UNT PAID _	\$ l,	783.00								



For Inspections Call 770-964-2244 ext. 401

Permit # 22-390

Date: 12/12/22

REPAIRS/ALTERATIONS PERMIT APPLICATION

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

ob Location 106 SHANNON C		Subdivision Lot #					
Property Owner: ANDRE SAI	LERS	Zoning Classific					
ype of plans submitted RI	E_ROOF	Construction to be sta	arted no later than 12/12				
Estimated Building Cost: \$	\$10,246.33		/ /				
Describe work being done	REMOVE EXISTING SHINGLES	AND REPLCE WITH NEW SHINGL	ES ONLY				
		and a second second					
Width of Lot:		Width of Building:					
Depth of Lot:		Length of Building:					
Type of Sewage:	0000111001	Total Floor Area:					
Material of Roof:	Holhalt Shingles	Heated Floor Area: SIDING STUCCO STONE B	DICK MASONADY BRICK				
Walls- Siding (circle)	WOOD COMBINATION	SIDING STUCCO STONE E	BRICK MASONARY BRICK				
		Approximation of the second					
Front Yard Set-Back		Side Yard Set-Back					
Back Yard Set-Back		Side Yard Set-Back					
为自己的 是不是对自己的	The same of the sa						
Phone Number 90	hamble Durwood 04-900-5472	LIRA Ste 500					
Subcontractors:	hamble Dinwood 04-900-5472	Cell #: 678-98	Bus # 16610076				
Subcontractors: Electrical	hamble Dinwood 94-900-5472	Cell #: 678-98					
Subcontractors: Electrical Plumbing	hamble Dunwood 04-900-5472	Phone: Phone:					
Subcontractors: Electrical Plumbing	hamble Dinwood 04-900-5472 Be State Licensed And Must Permit Ea	Phone: Phone: Phone:	34-7062				
Subcontractors: Electrical Plumbing HVAC NOTE: All Sub-Contractors Must	Be State Licensed And Must Permit Es	Phone:	f they are licensed.				
Subcontractors: Electrical Plumbing HVAC NOTE: All Sub-Contractors Must USE OF SUBS OTHE THE PERMIT AND PRIOR AF AND/OR OTHER MEASURE APPROVAL OF SUBSEQUEN THIS PERMIT BECO	Be State Licensed And Must Permit Easter THAN LISTED IN CONJUNCTOR PROVAL OF THE CITY, FAILURES, INCLUDING REVOCATION TO PERMITS FOR BOTH THE CONDINES NULL AND VOID IF WORD ONSTRUCTION OR WORK IS SU	Phone: Phone: Phone: Phone: ON WITH THIS PERMIT REQUIRE TO SECURE MAY RESULT OF PERMIT AND/OR PROBANTRACTOR AND UNAUTHORIZER OR CONSTRUCTION AUTHORIZER OR C	f they are licensed. RES FORMAL AMENDMENT OF IN STOP-WORK ORDER, FINE TIONARY PERIOD PRIOR TO ED SUB-CONTRACTOR. ORIZED IS NOT COMMENCED				
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Subcontractors: Electrical Plumbing HVAC NOTE: All Sub-Contractors Must USE OF SUBS OTHE THE PERMIT AND PRIOR AF AND/OR OTHER MEASURE APPROVAL OF SUBSEQUEN THIS PERMIT BECO WITHIN 6 MONTHS, OR IF CO ANY TIME AFTER WORK IS S I hereby certify that I have provisions of laws and or specified herein or not. cancel the provisions of	Be State Licensed And Must Permit Ear ER THAN LISTED IN CONJUNCTION PPROVAL OF THE CITY, FAILURIS, INCLUDING REVOCATION TO PERMITS FOR BOTH THE CONDUCTION ON WORK IS SUBTARTED. BY THE PROVINCE OF THE CONTURE OF T	Phone: Ph	f they are licensed. RES FORMAL AMENDMENT OF IN STOP-WORK ORDER, FINE TIONARY PERIOD PRIOR TO ED SUB-CONTRACTOR. ORIZED IS NOT COMMENCED OR A PERIOD OF 3 MONTHS AT to be true and correct. All III be complied with whether give authority to violate or				
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26 West Campbellton Street Fairburn, GA 30213 770-964-2244 Fax 770-306-6919

SWIMMING POOL PERMIT APPLICATION

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Project Address 84 Castle Property Owner: Arthur Formatted 5 december 1997	Idams	Subdivision Ine F Zoning Classi Estimated Construc	fication	Lot # 153
Width of Pool: Depth of Pool: Heated?: Material of Pool: Indoor or Outdoor: Above ground or In-ground: Front Set-Back Rear Set-Back	Dutdoor Inground	No N	ction Cost: \$ 40	or information or information ommentary omments. 21 VA
	Burnett N St N Fr -6757 Ce		# 5194	
Subcontractors: Electrical Randy G Plumbing HVAC	ard Ner	Phone: 700 Phone: Phone:	e 564 60	140
USE OF SUBS OTHER THAN LISTED PERMIT AND PRIOR APPROVAL OF THE OTHER MEASURES, INCLUDING REVOLUTION OF THE PERMIT BECOMES NULL AND MONTHS OR IF CONSTRUCTION OR VAFTER WORK IS STARTED.	HE CITY. FAILURE TO SEI DCATION OF PERMIT AN HE CONTRACTOR AND UN OID IF WORK OR CONS	CURE MAY RESULT IN ID/OR PROBATIONAR' NAUTHORIZED SUB-CO TRUCTION AUTHORIZED	ISTOP-WORK ORDEI YPERIOD PRIOR TO ONTRACTOR, ZED IS NOT COMMEI	R, FINE AND/OR APPROVAL OF NCED WITHIN 6
I hereby certify that I have read an provisions of laws and ordinances specified herein or not. The grant cancel the provisions of any other requirements.	governing work perforing of a Building Perr r state or local law re	rmed under this per nit does not presur gulating construction	mit will be complied ne to give authorit on or the performa	d with whether y to violate or nce of related
CONTRACTOR/OWNER SIGNAT	URE: 12. K.	Bugne	DATE 10	7/13/2022
Plan Approval	Permit Approv	al	Date	
Plan Review Fee \$ 150 \(\tag{50} \)		Permit Fee \$	680-00	
Almin f	Ze: \$25. co			3

Permit: 9705.00

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

Permit # 22 -392

Date: /2//2/22

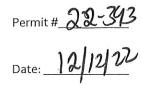


Electric,
Mechanical and Plumbing
Permit Application
Property Owner: Kes. Pro
Location Address: 265 Splitwood Lane, Fairpurn Ga. 30213
Contractor: Ed Shepard (561) 504-5218/April
Address: 233 Birchwalk Ct. Riverdale Ga Email: reggieapex Dyapoo.com
Phone#: 770 846 2815 City, ZIP License#: 8/2/
Information 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: Installing 2.5 Gas System A/C and Coil
Estimated Construction Cost 3,000 Permit Fee \$\\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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 PERFOMANCE 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: /

This is to certify that I will personally supervise this installation





Electric, Mechanical and Plumbing Permit Application





Permit # 22-394

Date: 12 | 13 | 22

COMMERCIAL BUILDING PERMIT APPLICATION

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

Property Own	er: Barjo	na Andre	ews		Job Loca	ation A	ddress	: 114 W	Campb	elltor	Rd; Fai	rburn, GA 30213
Project Name Autism Complete LLC Lot # 67 Zoning District O&I												
General Conti	ractor:	Aspire Co	onstruct	on & Design			G	A Lic#	E: RLC	0 00	4346	
Address: 352 l	Jniversity /	Ave SW S	Ste S-10)7								
Phone Number	er 45760-5638	3By0)6665		Cell #	#: 450 -508-0			Fax #:	N/A	-		
Width of Lot: 99 FT Heated Floor A										295	SF	
	ot Size (sq. ft.) 21,357 SF Total Floor Area:									295	SF	log ET
Front Yard S	et-Back	(35 F	Т	Side Yard Set		15 FT		Rear \	-	Set-	Васк	25 FT
Check One					Sewa				otic			
Exterior Mate							BRICK 4	SIDES				
Estimated Co	st to Bu	ild: \$ <u>38</u>	50,000									
		- ,,			LDE	# & [Note of			-		
Date of Mayor	r & Cou	ncil				roval	ate of					
Approval					App	IOVAI						
Subcontract	ore: C	OMME	PCIA	L TRADES MU	ST RE PE	RMITT	FD BI	FFORE	WOR	KE	BEGIN	IS.
Electrical	013. 0	OMM	I VOIN	L ITABLO IIIO	912612			one:				
Plumbing								one:				
HVAC							Ph	one:				
NOTE: All Sub-Co	ntractors N	Must Be S	State Lic	ensed And Must Perr	nit Each Job I	Personally	. Proof	of license	is requir	ed.		
Trade Permit	s:											Dete
Trade		Perm	it#	Date		ade		P	<u>ermit</u>	#		Date
Electric						her						
HVAC					Of	her						
Plumbing					Of	her						
Other					Of	her						
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: DATE BOTT BO												
Plan Approval Date												
Temporary Pole Water Tap (Base Utility Deposit	ed on siz	ze)	\$ \$ \$		Permanent Sewer Tap Permit Fee			Revie	\$ \$ W \$	2	.450)-Ob
Plan Review (45		(4)) \$	1,225.00	Patern	atcr	II RE	guire	d Ad	Som	n Fee	-0b -: 425
Plan Review (45		(4)	3,	156.00	se subm	it revis	ions (or irrior	mauc	on	n Fee	- 825
Plan Review (45		(4)	3,	156.65 _{les}	se subm requeste addressi	d and	a con	nmenta	ary	on	n Fee	- 425



For Inspections Call 770-964-2244 ext. 401

Permit # 22

REPAIRS/ALTERATIONS PERMIT APPLICATION This is not a permit, and no work will be started until the permit is issued.

Job Location 8320 Mayem	Dr. Fairburn GA 30213	Subdivision	Lot#
Property Owner: Maria Huma	inder / Alexa secano	Zoning Classifica	tion
Type of plans submitted	_	Construction to be star	ted no later than 12/31/2022
Estimated Building Cost: \$	30,000		
Describe work being done: N	iew 8iding		
	0		
Width of Lot:	17" LEFF W" RIGHT	Width of Building:	
Depth of Lot:	W" BOTH SINCS	Length of Building:	
Type of Sewage:		Total Floor Area:	
Material of Roof:		Heated Floor Area:	
Walls Siding (circle)	WOOD COMBINATION S	DING STUCCO STONE E	BRICK MASONARY BRICK
1	<u>'</u>		
Front Yard Set-Back		Side Yard Set-Back	
Back Yard Set-Back		Side Yard Set-Back	
Dack Taru Set-Dack		Side Tard Set-Back	
General Contractor: How	MUR	GA Lic#:	
General Contractor: How Address: 8520 Warfern	Dr.		
Phone Number 18-356	9335	Cell #:	
Thone Number	4103	OCII #.	
Subcontractors:			
Electrical , (\		Phone: A / A	
Plumbing \\ \A		Phone:	
HVAC		Phone:	
NOTE: All Sub-Contractors Must Be Sta	ate Licensed And Must Permit Eac		oof they are licensed.
			JIRES FORMAL AMENDMENT OF
THE PERMIT AND PRIOR APPRO			
AND/OR OTHER MEASURES, IN APPROVAL OF SUBSEQUENT PER	RMITS FOR BOTH THE CONT	RACTOR AND UNAUTHORIZ	ZED SUB-CONTRACTOR.
THIS PERMIT BECOMES	NULL AND VOID IF WORK	OR CONSTRUCTION AUT	HORIZED IS NOT COMMENCED
WITHIN 6 MONTHS, OR IF CONST		PENDED OR ABANDONED F	OR A PERIOD OF 3 MONTHS AT
ANY TIME AFTER WORK IS STAR	ΓED.		. 65
	d and are make a delate and	! 4! - · · · - · · · · · · · · · · · · · ·	4- b- 4 d All
I hereby certify that I have rea provisions of laws and ordinal			
specified herein or not. The			
cancel the provisions of any	other state or local law i	Appulation construction of	or the performance of related
requirements.	/ /	17 77	ſ ,
The second section of the second seco	Att	that I	11/15/200
CONTRACTOR/OWNER SIG	NATURE:		DATE 11 19 2022
Plan Approval	Permit Appro	val	Date
TOTAL PERMIT FEE:	15.0D		



*If not approved, reason for denial:__



Permit # 22-346

Date: 12|8|22

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 plan

and if same is granted, agree to conform to all laws and ordinances regarding same. Job Location 2028 Broadmoor Way, Fairburn, Ga 30213 Subdivision Fairways at Durham Lakes Lot # 98 Zoning Classification Residential Property Owner: Kevin Porter Construction to be started no later than 12/21/2022 Type of plans submitted Fence Estimated Building Cost: \$4,670.00 Describe work being done: Fence being built unto backyard Width of Lot: 66.8 Height of Fence: 6 Feet Depth of Lot: 124.1 Material of Fence: Pressure Treated Pine Wood Bus Lic #: 00079838 General Contractor: Bravo Fence (Christopher) Address: 1190 Hayes Industrial Drive, Marietta, Ga 30062 Cell #: 770-355-6839 Phone Number 770-966-9970 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. 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 X 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 of the performance of related requirements. CONTRACTOR/OWNER SIGNATURE: Permit Approval Plan Approval TOTAL PERMIT FEE: \$100.00



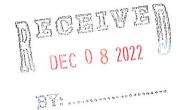
REPAIRS/ALTERATIONS PERMIT APPLICATION

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and it same is granted, agree to con	form to all laws and ordinance	es regarding same.	
Job Location Styl Many	TARRE OF FAIRLY	Subdivision Mandru 61	em Lot #124
Property Owner: Acum 5		Zoning Classification	on sie
Turn of plane submitted 1/10	1	Construction to be starte	d no later than 11 10 2012
Type of plans submitted	C 111 - 2	Construction to be starte	a no later than thiotas
Estimated Building Cost: \$ 3			
Describe work being done: H	cu cabacti pocutusi,	OCH Flar COUNTY, New faces	at men sinks inch
Interior / Sxte a Paint, Acm	Cours, trinscour, c	cornice Gapair	
Width of Lot:	600 (d)		9
Depth of Lot:	ico	Length of Building:	0
Type of Sewage:	Rubla		735
Material of Roof:	Asphaclt Shinib	Heated Floor Area:	535
Walls- Siding (circle)	MOOD COMBINATION	SIDING STUCCO STONE BRI	CK MASUNARY BRICK
		A 40 - 40 - 40 - 40 - 40 - 40 - 40 - 40	
Front Yard Set-Back	20	Side Yard Set-Back	10
	2.0	Side Yard Set-Back	1.0
Buon Fara Got Buon	· V		
General Contractor: Res.	res Harrison	GA Lic #: _(LIGACKU72
Address: 2522 Civille A	cichy By Losanoily	CM BOSZ	
Phone Number 678 900	9516	Cell #:	
Subcontractors:			
Electrical		Phone:	
Plumbing		Phone:	
HVAC		Phone:	
NOTE: All Sub-Contractors Must Be St	ate Licensed And Must Permit Ea	ach Job Personally. We Require Proof	they are licensed.
THE PERMIT AND PRIOR APPRO AND/OR OTHER MEASURES, I APPROVAL OF SUBSEQUENT PE	OVAL OF THE CITY. FAILU NCLUDING REVOCATION ERMITS FOR BOTH THE CON S NULL AND VOID IF WOR TRUCTION OR WORK IS SU	OF PERMIT AND/OR PROBAT NTRACTOR AND UNAUTHORIZE RK OR CONSTRUCTION AUTHO	IN STOP-WORK ORDER, FINE FIONARY PERIOD PRIOR TO SUB-CONTRACTOR. DRIZED IS NOT COMMENCED
I hereby certify that I have resprovisions of laws and ordina specified herein or not. The cancel the provisions of any requirements.	inces governing work pe granting of a Building F	rformed under this permit wi Permit does not presume to	III be complied with whether give authority to violate or
CONTRACTOR/OWNER SIG	SNATURE:		DATE DIZAL
Plan Approval	Permit App	roval Sun 9 An	Date 007 28 2020
a. I	55.00	July July	or code compute
TOTAL PERMIT FEE:	30.00	,	- inpliance
For Inspections Call 770-964-	2244 ext. 401		μ·
Permit	1 # 480.00		. W. C. J. P.
Plan R	evieu: \$150.0		
Admin	Foe: # 25.CL		





Permit # 12-398

Date: 12/15/22

REPAIRS/ALTERATIONS PERMIT APPLICATION

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

Job Location _&	5 STEICK Dend DR	Subdivision	Lot #			
Property Owner:	Diena Sinkfield	Zoning Classific	ation 2-4			
Type of plans submit	tted •	Construction to be sta	arted no later than			
Estimated Building C	Cost: \$ 75,000	_ 0 1				
Describe work being		oun Remodel				
		Note that CP 11 II				
Width of Lot:		Width of Building:	ien			
Depth of Lot:		Length of Building:	Revised			
Type of Sewage:		Total Floor Area:				
Material of Roof:	AND OR SOUNDING TION	Heated Floor Area:	PRICK-MASONARY BRICK-I			
Walls- Siding (circle	e) WOOD COMBINATION	SIDING STUCCO STONE	BRIGHT WASONAISH ISHIPAN			
		· · · · · · · · · · · · · · · · · · ·	print revisions comments			
Front Yard Set-Bac	k	Side Yard Set-Back	pult tend a comme.			
Back Yard Set-Back		Side Yard Set-Back	ested review			
Dack Tara Get Basi		Sleared	esingal			
		Ad	Les of			
General Contractor	T: EARTH IST CONSTRU		10 0000 12			
Address: 308 Phone Number 4	How 855 Faute	Lilla, GA ROVIII				
Phone Number (4	04)391-4027	Cell #:				
I Hollo Halling Q						
Subcontractors:	1.1.2					
Electrical Clar	Word & Cheuntala Elec	Phone: (770)	527-0816			
Plumbing	(3.00)	Phone:				
HVAC		Phone:				
NOTE: All Sub-Contractors	Must Be State Licensed And Must Permit E	Each Job Personally. We Require I	Proof they are licensed.			
NAME OF TAXABLE PARTY OF TAXABLE PARTY.						
USE OF SUBS	OTHER THAN LISTED IN CONJUNC	TION WITH THIS PERMIT REC	JUIRES 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						
ADDROVAL OF SUBSECUENT 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.						
ANY TIME AFTER WOR	KIS STARTED.					
I horoby cortify that I	have read and examined this a	onlication and know the s	ame to be true and correct. All			
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 r	not. The granting of a Building	Permit does not presume	to give authority to violate or			
cancel the provision	s of any other state or local la	w negulating construction	or the performance of related			
requirements:			/ /			
		and P Han	DATE 12/7/22			
CONTRACTOR/OW	NER SIGNATURE: / 6	specific transfer	DATE			
	D. Jit A.	Kenn	- ARRData			
Plan Approval	Permit Ap	provai	2022Date			
TOTAL DEDMIT SEE.	YE 950 00	DEC	- ilance			
TOTAL PERMIT FEE:	1 100,00	See and	Oldmen			
TOTAL PERMIT FEE: 450, 00 For Inspections Call 770-964-2244 ext. 401						
•						
Pennit. 775.00 1 Plan Recieu: \$1150 1 Abrum Fee: \$25						





Permit#

REPAIRS/ALTERATIONS PERMIT APPLICATION

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

and it same is granted, agree to o	omorn to all land	CONTRACTOR STATES			
Job Location 51 Strickland St. F.	Subdivision	Lot #			
Property Owner: TAKEYLA FL	Zoning	Zoning Classification			
Type of plans submitted N/A	Constructio	n to be star	ted no later than 1/10/23		
Estimated Building Cost: \$_1	15,000				
Estimated Building Cost: \$_ Describe work being done:	Add gutters, repair side porch ha	ndrail, remove back d	eck, install water	er neater. Clean ducts.	
		Type data of Data	Idinas		
Width of Lot:		Width of Bui			
Depth of Lot:		Length of Bu		1755	
Type of Sewage:	Public	Heated Floor		1755	
Material of Roof:	Asphalt WOOD COMBINATION	Heated FIOO	MICO.	BRICK MASONARY BRICK	
Walls- Siding (circle)	MOOD COMBINATION	SIDING STOCK			
Front Yard Set-Back		Side Yard S			
Back Yard Set-Back		Side Yard S	et-Back		
			CA Lio#	RLCO003812	
General Contractor: Firesi	gn Design Build LLC		GA LIC #.	TILO COCCO 12	
Address: 112 S. Main Street Jor	nesboro, GA 30236	0 11 4 200 97	1.1310		
Phone Number 470-704-810)6	Cell #: 202-37	4-4049		
			7.5. 100 Vo 100		
Subcontractors:		Phone:			
Electrical		Phone:	404-456-1210		
1 tennaing	Stephen's Plumbing				
HVAC NOTE: All Sub-Contractors Must Be State Licensed And Must Permit Each Job Personally. We Require Proof they are licensed.					
THE PERMIT AND PRIOR APP AND/OR OTHER MEASURES APPROVAL OF SUBSEQUENT	PROVAL OF THE CITY. FAIL S, INCLUDING REVOCATION PERMITS FOR BOTH THE CO MES NULL AND VOID IF WO NSTRUCTION OR WORK IS S	OF PERMIT AND ONTRACTOR AND	ND/OR PROP	UIRES FORMAL AMENDMENT OF LT IN STOP-WORK ORDER, FINE BATIONARY PERIOD PRIOR TO IZED SUB-CONTRACTOR. THORIZED IS NOT COMMENCED FOR A PERIOD OF 3 MONTHS AT	
I hereby certify that I have provisions of laws and ord specified herein or not. T cancel the provisions of a requirements.	read and examined this a linances governing work p the granting of a Building any other state or local to	Downit dose no	ot prosume	to be true and correct. At will be complied with whether to give authority to violate or the performance of relater	
CONTRACTOR/OWNER	and the second of the second of the Assessment o	ray M	DEC 12	DATE 12 923	
Plan Approval	Permit Ap	pprovai	ande con	mpliance Date	
TOTAL PERMIT FEE:	475.00				
For Inspections Call 770-9	64-2244 ext. 401 nt! \$300 Plan	Review \$	150 1 A	Sun Fee: \$25	
Verm	14: 7300 The	100.	111		





Permit #	22-400
Date:	12/19/22

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 8480 Senoia Roa	ad	Subdivision N/A Lot # N/A			
Property Owner: Fairway Foodies LLC		Zoning Classification C			
Type of plans submitted Sketch and plot plan		Construction to be started no later than April 2023			
Estimated Building Cost \$	3 9.882				
Describe work being done	Install 4' black chain link fence are	ound perimeter and 6' wood stocka	de around AC unit.		
Width of Lot:		Height of Fence:	4' and 6'		
Depth of Lot:		b.			
Material of Fence:	black chain link and wood				
		Dualia	H. 002081		
General Contractor: Natural Contractor: Natura	ral Enclosures Fence Company LLC	Bus Lic	#: 002961		
Address: 101 Jonesboro RD, N Phone Number 770-506-32		Cell #:			
Phone Number 170-300-32	22				
THIS PERMIT BECOI WITHIN 6 MONTHS, OR IF CO ANY TIME AFTER WORK IS ST	NSTRUCTION OR WORK IS SU	RK OR CONSTRUCTION AU JSPENDED OR ABANDONED	ITHORIZED IS NOT COMMENCED FOR A PERIOD OF 3 MONTHS AT		
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_x_ 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: Richa	rd Taylor	DATE 12/15/2022		
Plan Approval	Permit App	proval	Date <u> 2 14 21</u>		
TOTAL PERMIT FEE: \$100	.00	,			
*If not approved, reason fo	r denial:				



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

Electric,

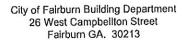
Mechanical and Plumbing
Permit Application Permit Application
Property Owner: Bruke Harris Location Address: 99 Bay St NF Fairburn CA Contractor: Douglas Watson Address: 212 Boulder Chart Ct Ellenwood CA 30294 Phone#: 404-645-6495 License#: LVII Holds F.
Information on Project: (✓All That Apply) ☐ Commercial ☐ 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: Intallation of fire alarm and component Out Station S Smalle cletectors and notification Clevices.
Estimated Construction Cost \$ 10,000 Permit Fee \$ 205.00
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 PERFOMANCE 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 MONTALS AT ANY TIME AFTER WORK IS STARTED

CONTRACTOR SIGNATURE: _

This is to certify that I will personally supervise this installation

DATE: 10-27-27



Permit # 22-402

Date: 12/21/22



Electric, Mechanical and Plumbing

'ermi	t Appii	catio							
Property Ow			though c						
Location Add	dress:	10 BOY	HONON	PUMP	FMRBURN	GA	3.213		
	CLIFF'S F	IFE EXT	NEVISHER	Co.,	INC.			up	
Address:	311 BELL PAR	k drink	, WOUDSTOCK	C GA	30188 Email:	da	id e clif	Estire com	
Phone#:	Street 770	-591-517	Cit	Ξ Υ ,	30188 Email: ZIP License#:	00	0413		
	Information on Project: (✓ All That Apply) ✓ Commercial □ Residential (1 or 2-Family Dwelling)								
System Modifications ☐ Electrical ☐ Mechanical ☐ Plumbing ☐ Water/Sewer									
□ Eleo Amps	ctric Service	□ Ne	w service Utility (Co	□Upgrade Servi	ce		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: INSTALLATION OF A PRE-ENGINEER-ED INDUSTRIAL DRY CHEMICAL							rt		
Detail of Work: INSTALLATION OF A PRE-ENGINEERED INDUSTRIAL DRY CHEMICAL FIRE SUPPRESSION SYSTEM IN PRINT BOOTH AND MIXING ROOM.									
Estimated	d Construction	Cost t	-5,000.00)	Perm	it Fee	#	425.00	_
STATE OR LOCA FEES. THIS PE	HANICAL OR PLUM	BING PERMIT DO G CONSTRUCTIO JLL AND VOID I	DES NOT PRESUM N OR THE PERFOR F WORK AUTHOR	E TO GIVE A MANCE OF F RIZED IS NO	KNOW THE SAME TO BE AUTHORITY TO VIOLAT RELATED REQUIREMEN OT COMMENCED WITH ARTED.	E OR CAN	NCEL THE PROVI PERMITS ARE SU	SIONS OF ANY OTHEI JBJECT TO INCREASEI	R D

CONTRACTOR SIGNATURE:

This is to certify that I will personally supervise this installation

DATE: 12 12 2022