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Permit # 21 - 376Date: 9/2/21

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 121 Rober	its Street	_Subdivision	IRLot #//A
Property Owner: Rencon	Partners	Zoning Classifica	ation <u>Commercial</u>
Type of plans submitted		Construction to be sta	rted no later than S-16- 21
Estimated Building Cost: \$ 3			
Describe work being done: _(Changing Fer	nce location as	+ back corner
OF Property.	55		
Width of Lot:	357'54	Height of Fence:	6 54.
Depth of Lot:	277 51.		
Material of Fence:	Chain link		
Please See Attach	ed Hoshlighted	Circled area	•
•	22		
General Contractor: Re Address: <u>300 Fast</u> Br Phone Number <u>210</u> -	anolds Constr and Street 769-410410	Cell #:	: 2832

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 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 8-5-21
Plan Approval	Permit Approval	y Holling	Date 9/2/21
TOTAL PERMIT FEE: \$10.00			

*If not approved, reason for denial:_

Relocate provis Rt. only





Permit #	21-377
Date:	9/2/21

REPAIRS/ALTERATIONS PERMIT APPLICATION

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Job Location 130 Hearth Way	Subdivision	Lot #
Property Owner: Lonnie and Annie Jennings	Zoning Classificatio	n
Type of plans submitted RE-ROOF	Construction to be started	no later than <u>9/7/2021</u>
Estimated Building Cost: \$16,497.96		
D il line de la Demous quisting chingle	s and raplace with new shingles only	

Describe work being done: Remove existing shingles and replace with new shingles only

Width of Lot:		Width of Building:	
Depth of Lot:		Length of Building:	
Type of Sewage:		Total Floor Area:	
Material of Roof:	Asphalt Shingles	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	0

General Contractor: ImproveIT of Atlanta	GA Lic #: <u>NA</u>	
Address: 4360 Chamblee Dunwoody Rd Ste 500		•
Phone Number 404-900-5472	Cell #:	

Subcontrac	tors:	
Electrical	NA	Phone:
Plumbing	NA	Phone:
HVAC	NA	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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lequitements.	H. A. H	NA MAR	4 0.10
CONTRACTOR/OWNER SIGNATURE	lodrey to	DATE	8/31/202/
Plan Approval	_ Permit Approval	Date_	
AX GG			

TOTAL PERMIT FEE: 498

For Inspections Call 770-964-2244 ext. 401



DV.



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

-378 Permit #_____ 918 Date:

HVAC PERMIT APPLICATION

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

Property Address: 5000-B Bohannon Rd, Fairburn, Ga 3021	13
Property Owner:	
HVAC Contractor: Reese Services LLC	Master License #
Address of Contractor: 110 Howell Rd, Suite A, Tyrone, G/	A Telephone #:

Heating Units	Refrig/AC Units	
# of Units	# of Units	5
Name	Name	
Model #		38APD11564-26020
BTU . '	Tons	115
Heat Loss	Heat Gain	
CFM	CFM	1
Fans	Grease Hoods	
# of Units 5	# of Units	
H.P. 20	Sq. Feet	
CFM 50,000	Size of Vent	
	CFM Required	
Gas Pipe	Gas Range Outlets	
-	Outlots	
# of Units	# of Outlets	,

Briefly Summarize the Job:	stalling (5) 120 A/C system	ns with air turnove	er units in distrib	ution warehouse	1
(Estimated Job Cost) ^{1,500,000}	(F	Permit Fee)	\$ 4,4	550	- 7
Signature of Applicant:	Talson		Date:	8/5/2021	

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.



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

Permit #: 21-379 4/9/2021 Date:

TEMPORARY TRAILER PERMIT APPLICATION

Purpose of Trailer:	Site Address: 7280 Oakley Inclustrial Blvd Lot#
Requested time period: 9/3/21 to 9/8/22 next Fee: \$250.00 Non-Refundable *** Applicant Name: Strart, Staffing Phone #: \$33-\$88-0120 Applicant Address: 181 W. 14600 Str1. Bluffdale. UT \$4065 Trailer Description: Model: Model: UT \$4065 Make: MO 4010 Model: Model: Office Year: Unknown Trailer Tag #: N/A State of issurance: N/A Pull Vehicle Description (if applicable) Make: N/A Model:	Purpose of Trailer Mobile Office - Recruiting
Applicant Name: Smarth Staffing Phone #: \$33-\$88-0120 Applicant Name: Smarth Staffing Phone #: \$33-\$88-0120 Applicant Address: 781 W. 14600 Staffing Phone #: \$33-\$88-0120 Applicant Address: 781 W. 14600 Staffing Phone #: \$33-\$88-0120 Trailer Description: Make: MO 4010 Model: Make: MO 4010 Model: Mobile Office Year: Unknown Trailer Tag #: N/A Pull Vehicle Description (if applicable) Make: Model:	Requested time period: 9/3/21 10 9/3/22
Applicent Address: 781 W. 14600 S.#1., Bluffdale. UT 84065 Trailer Description: Make: MO 4010 Make: MO 4010 Year: Unknown Trailer Tag #: N/A State of issurance: N/A Pull Vehicle Description (if applicable) Make: N/A Year: Trailer Tag #: State of issurance: N/A Pull Vehicle Description (if applicable) Make: N/A Make: N/A Medet:	
Applicent Address: 781 W. 14600 S.#1., Bluffdale. UT 84065 Trailer Description: Make: MO 4010 Make: MO 4010 Year: Unknown Trailer Tag #: N/A State of issurance: N/A Pull Vehicle Description (if applicable) Make: N/A Make: N/A State of issurance: N/A Pull Vehicle Description (if applicable) Make: N/A Make: N/A Medet:	
Trailer Description: Make: MO_4010 Model: Mobile_Office	Applicant Name: DMart Statting Phone # 033-088 0120
Make:	Applicant Address: <u>78</u> W. 14600 S. #1, BlutFdale UL 84065
Make: MOHO_1OModel: MO_1E_OFFACE	Trailer Description:
Year: Unknown Treiler Tag #:	
Pull Vehicle Description (if applicable) Make:	Voar (Ink paulo Trailer Tag # N/A) State of issurance: N/A
Make: N/A Model: Year: Trailer Tag #: Stale of Issurance: Describe of water supply: United Site Services Potable Water Service (See). To itels Describe of sewer supply: United Site Service Sewer Service. * A survey must be provided, showing the intended location of the temporary trailer. By affixing my signature below, I hereby confirm that all answers supplied by me in the above application are true and correct. I understand that failure to provide truthful information as requested herein, or in any communication with any City of Fairburn official relative to this application, may result in denial of the permit be issued as a result of this explication, discovery of false information supplied in this application, or failure to abide by the laws of any local, state, or federal antity may result in revocation of this permit and/or other penalties as provided by law. Applicant Signature: 9/8/21	Non. <u>ONTERDOVOR</u> Neuron Lagues
Year:	Pull Vehicle Description (if applicable)
Year:	
Describe of sewer supply: <u>United Site Service Sewer Service</u> * A survey must be provided, showing the intended location of the temporary trailer. By affixing my signature below, I hereby confirm that all answers supplied by me in the above application are true and correct. I understand that failure to provide truthful information as requested herein, or in any communication with any City of Fairburn official relative to this application, may result in denial of the permit requested. I further understand that, should a trailer permit be issued as a result of this application, discovery of false information supplied in this application, or failure to abide by the laws of any local, state, or federal entity may result in revocation of this permit and/or other penalties as provided by law.	Year: Trailer Tag #: State of Issurance:
Describe of sewer supply: <u>United Site Service Sewer Service</u> * A survey must be provided, showing the intended location of the temporary trailer. By affixing my signature below, I hereby confirm that all answers supplied by me in the above application are true and correct. I understand that failure to provide truthful information as requested herein, or in any communication with any City of Fairburn official relative to this application, may result in denial of the permit requested. I further understand that, should a trailer permit be issued as a result of this application, discovery of false information supplied in this application, or failure to abide by the laws of any local, state, or federal antity may result in revocation of this permit and/or other penalties as provided by law.	and the site Services Potable Water service (\$00). Toilts
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City Official: Harry Lifes Date: 9-9-2021	correct. I understand that failure to provide truthful information as requested herein, or in any communication with any City of Fairburn official relative to this application, may result in denial of the permit requested. I further understand that, should a trailer permit be issued as a result of this application, discovery of false information supplied in this application, or falure to abide by the laws of any local, state, or federal entity may result in revocation of this permit and/or other penalties as provided by law.
Approval: 6 MONTHE Deniat	

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Permit # <u>21 - 380</u>	
Date: 9/9/2/	

FENCE PERMIT APPLICATION

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Job Location 09 F090400511,206	Subdivision	Lot #
Property Owner: Jusano Castaneda	Zoning Classification 12-1	0-2021
Type of plans submitted	Construction to be started no later	than
Estimated Building Cost: \$ 3000		
Describe work being done:		· · · ·

Width of Lot:	90'	Height of Fence:	6' SEE NOTE		
Depth of Lot:	130'		BELOW		
Material of Fence:	wood				
General Contractor: Susano Ustano da Bus Lic #: Address: 10 Nowell dr Fuirburn 64 Phone Number 404 9838 Cell #: 404 394 8159					

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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 SIGNAT	URE: Lespan	Gitnelig	DATE <u>\$ 31 2</u> 0	2
Plan Approval	Permit Approv	al HAnvey Sefler	Date 9-8-24	

TOTAL PERMIT FEE: \$10.00

*If not approved, reason for denial:_

* NO POATION OF A 6' FONCE CAN be installed in the Front yAnd 1/ soles 9/26.





Permit #	21-381
Date:	919/21

REPAIRS/ALTERATIONS PERMIT APPLICATION

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Job Location 8400 BOMA	NNON Subdivision	Lot #
Property Owner: KSAU RU	b ?o Zoning Classification	·
Type of plans submitted	Construction to be started	no later than
Estimated Building Cost: \$()	010	//
Describe work being done: Fin	esh Kennode Ging Electrical MECI	Knicul
VIVM PPNG FLOOF	Plan S Tor me BrisTING Hourse	
Width of Lot:	Width of Building:	

	wath 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: GA Lic #: 161 (G) MATO PIMIAC WAS CREEK, UP 30097 Address: 11110 BRONTON Phone Number 798-Cell #:

Subcontractors:

Electrical	Phone:
Plumbing	Phone:
HVAC	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.

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requirements.				
CONTRACTOR/OWNER SIGNATURE:	H^{n}		DATE <u></u>	2_/
	Permit Approval	Hovery Stalles	Date 9-8-21	
TOTAL PERMIT FEE: # 220.00	Ne Double F	EES Applies, 6	Nork started	who
For Inspections Call 770-964-2244 ext. 401	Permit	L.		
Tradesman Required to	Apply for	Seperate p	ermits	

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	SEP	0	9	202	1	U

BY:

-	Permit #	21-382
	Date:	9/9/21

ELECTRIC PERMIT APPLICATION

Notice: This form must be completed, signed	l, and su	ubmitted before work may comm	nence.
Property Address: 935 FELLOW	SH.P	RO FAIRBURN	GA 30213
Property Owner: MICKEY TO	JENE	E R	
Electrical Contractor: PLUGGED IN	ELEC.	TRICAL SERVICES	
Contractor Address: 118 PALMETT	O P.	O # H TYRDNE	6A 30290
Telephone: (770) 856-5214			
		Protection and the second s	
METER LOOPS	NO.	MOTORS	NO.
Metered Temp Services		Less than one H.P.	
30 Amperes		1 to 5 H.P.	
60 Amperes		5 1/2 to 10 H.P.	
100 Amperes	1000	10 1/2 to 20 H.P.	
125-300 Amperes		20 1/2 to 50 H.P.	
400 Amperes		50 + H.P.	
401-599 Amperes			and the second second second
		TRANSFORMERS USATERS	
600 + Amperes Outlets-SW Recap. & Fix		TRANSFORMERS - HEATERS FURNACES - APPLIANCES	NO.
Outlots-Overtecap. u Fix			
		Less than 1 K.W.	
RESIDENTIAL RANGES	NO.	1.0 K.W. to 3.5 K.W.	
Surface Unit		4.0 K.W. to 10 K.W.	
Oven Unit		10.5 K.W. to 25 K.W.	
Combined Electrical Range	N.C.	Over 25 K.W.	No. of the second s
RESIDENTIAL APPLIANCES	NO.	SIGNS	NO.
Water Heater		(Lighting)	
Clothes Dryer		(Misc.)	
Dishwasher	Sec.		
Disposal		FLOOD AND AREA LIGHTING	NO
Furnace		100 to 300 Watt	NO.
Venthoods		400 to 1,000 Watt	
		100 10 1,000 114	and the second se
Fans - bath & exhaust		And a second	and the second second
and the second	an an an	MISC.	NO.
GASOLINE DISPENSING PUMP	NO.	Swimming Pools	
(Lamp and Motor)		Mobile Homes	
		Sub Feeds	
	101		
X-RAY MACHINES Wiring & Connection	NO.	Florescent Fixtures Elevators	
Wining & Connection	5.2	Licvators	
Ü -	0.00	1 2 11	(
Briefly Summarize the Job:	200	AMP METER MAIN	Combo
(Estimated Job Cost) 200 °C		(Permit Fee)	3
A R			alal
Signature of Applicant:	~~	Date:	9/9/21
*For all inspections, call (770) 964-2244 ext 401.	Inspect	tions will be performed within 24 h	ours of request, excluding
weekends and Holidays. Re-Inspection fees:\$50	.00/100.	00/150.00 - Late permits subjec	t to increased fees.*





Permit# 2 Date:

FENCE PERMIT APPLICATION

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 Job Location 64 Pearl Street, Fairburn, GA 30213
 Subdivision Lot #

 Property Owner: Robin Anderson (Owner) / Bob McAteer (as of 9/28/2021)
 Zoning Classification _

 Type of plans submitted Fence Schematics and Plot Drawing
 Construction to be started no later than 9/24/2021

 Estimated Building Cost: \$3400.00
 Subdivision _

Describe work being done: Construct fence in the back yard around the grass.

Width of Lot:	35 feet	Height of Fence:	4 feet	
Depth of Lot:	73 feet			
Material of Fence:	Pressure Treated Pine			

General Contractor: First Fence of Georgia	Bus Lic #: 2021030193
Address: 1779 Big Shanty Drive, NW, Kennesaw, GA 30144	
Phone Number 770-422-9996	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: 50 MAR	DATE 9-9-2021
Plan Approval	Date <u>9-13-21</u>
TOTAL PERMIT FEE: \$10.00	

*If not approved, reason for denial:__



Permit # 21-384 Date:

PLUMBING PERMIT APPLICATION

<u>WARNING:</u> Permits will NOT be issued unless indicated information is shown hereon. Applicant is held responsible for all sewer and water lines on private property.

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

Property Address: <u>8400 Bohennon</u> RJ Property Owner: <u>ESAU</u> Rubio

Job Type	Check	Location Type	Check	Sewer Type	Check
New		Residential		City Sewer	
Add-on		Commercial		County Sewer	

Plumbing Contractor: Makest Happen & Jumbing	_ Master License #: <u>MF006183</u> I
Address of Contractor: b= Village P) stuckbrike Ga	Telephone: <u>678-933-2147</u>

Quantity	ltem	Quantity
	Laundry Tub	
	Roof Drain	
	Sewer	
2	Shower	
	Sink	
	Slop Sink	
	Tub/Bath	
	Urinals	2
	Use for (Concealed Gas Pipe)	
	Washing Machine	1
	Water Closet	2
	Water Heater (200K BTU & Over)*	
	Water Line	
	-	Laundry Tub Roof Drain Sewer Shower Sink Slop Sink Tub/Bath Urinals Use for (Concealed Gas Pipe) Washing Machine Water Closet Water Heater (200K BTU & Over)*

Briefly Summarize the Job: <u>set new fox</u> f	hoes	
		# 112.00
Signature of Applicant: Doudesbrat	Date:	9-15-2021

For all inspectionscall (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.



	E	G	E	T	W	B	R
j0	A	UG	3	1	202	1	IJ

BY:



REPAIRS/ALTERATIONS PERMIT APPLICATION

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Job Location 320 : 320 Sawgrass View Fairburn GA 30213	Subdivision	Lot #
Property Owner: Bryan Garrett	Zoning Cla	assification
Type of plans submitted	Construction to	be started no later than 10/1/2021
Estimated Building Cost: \$ 11840		
Describe work being done: 5.920 kW solar panel install on ro	oof of home c	•

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 BRI	СК

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

General Contractor:	GA Lic #:
Address:	
Phone Number	Cell #:

Subcontractors:					
Electrical	THOMAS PORTER- TITAN SOLAR POWERGA	Phone:	480-237-2375		
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:	CIC:	DATE 8 30 2
Plan Approval Harvey Pole	Permit Approval Howay Stolle	L Date 9-17-21
TOTAL PERMIT FEE: 5124.70	-	

For Inspections Call 770-964-2244 ext. 401



Permit#	21-385E
Date:	9]17/21

ELECTRIC PERMIT APPLICATION

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

Property Address: _____ Sawgrass View Fairburn GA 30213 Bryan Garrett **Property Owner:** Electrical Contractor: _____ Thomas Porter Titan Solar Power GA 525 W Baseline RD MESA AZ 85210 Contractor Address: Telephone: 480-237-2375 Master License #: EN217911 METER LOOPS NO. MOTORS NO Metered Temp Services Less than one H.P. 30 Amperes 1 to 5 H.P. 60 Amperes 5 1/2 to 10 H.P. 10 1/2 to 20 H.P 100 Amperes 125-300 Amperes 20 1/2 to 50 H.P 1 400 Amperes 50 + H,P 401-599 Amperes 600 + Amperes TRANSFORMERS - HEATERS Outlets-SW Recap. & Fix FURNACES - APPLIANCES NO. Less than 1 K.W. RESIDENTIAL RANGES NO. 1.0 K.W. to 3.5 K.W. 4.0 K.W. to 10 K.W. Surface Unit Oven Unit 10.5 K.W. to 25 K.W.

Combined Electrical Range		1	Over 25 K.W.	
计专用力 计分子 医乳液管 医子宫	all she			and the state of the state
RESIDENTIAL APPLIANCES	NO.		SIGNS	NO.
Water Heater		1	(Lighting)	
Clothes Dryer			(Misc.)	
Dishwasher		the second		AND AND AND A
Disposal		39	FLOOD AND AREA LIGHTING	NO.
Furnace		1	100 to 300 Watt	
Venthoods		54	400 to 1,000 Watt	
Fans - bath & exhaust			的复数的 化合金化合金	以保险过程的批评管理
			MISC,	NO.
GASOLINE DISPENSING PUMP	NO.		Swimming Pools	
(Lamp and Motor)		it.	Mobile Homes	
	Strates Print	11	Sub Feeds	
X-RAY MACHINES	NO.	al.	Florescent Fixtures	
Wiring & Connection			Elevators	

Briefly Summarize the Job: _____ KW solar panel install on roof of home

(Estimated Job Cost)		(Permit Fee) 📈	ch syr	SEE REPAIRS E ALTERATIONS
Signature of Applicant:	46		Date:	8/30/21

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 #	21 - 386
Date:	9/20/21

ELECTRIC PERMIT APPLICATION

Notice: This form must be completed, signed, and submitted before work may cor	mmence.
--------------------------------------------------------------------------------	---------

Property Address: 8400 Bohan	nm Rd		
Property Owner: Escu R	ubio		
Electrical Contractor: SAi GON Contractor Address: 55 Tyler	PLe	etric	
Contractor Address: 55 Tyler	Ridge	Joncybora Cra	30238
Telephone: (404) 247 4327		Master License #: _ E N	215092
1 State State State State State	5 /		Product States - Barriston - Marries
METER LOOPS	NO.	MOTORS	NO.
Metered Temp Services		Less than one H.P.	
30 Amperes		1 to 5 H.P.	
60 Amperes		5 1/2 to 10 H.P.	
100 Amperes 125-300 Amperes		10 1/2 to 20 H.P. 20 1/2 to 50 H.P.	
	1		
400 Amperes	10	50 + H.P.	
401-599 Amperes	1.15		
600 + Amperes	1.5	TRANSFORMERS - HEATERS	
Outlets-SW Recap. & Fix	10	FURNACES - APPLIANCES	NO.
	12	Less than 1 K.W.	
RESIDENTIAL RANGES	NO.	1.0 K.W. to 3.5 K.W.	1
Surface Unit		4.0 K.W. to 10 K.W.	
Oven Unit	X	10.5 K.W. to 25 K.W.	
Combined Electrical Range		Over 25 K.W.	
RESIDENTIAL APPLIANCES	NO.	SIGNS	NO.
Water Heater	4	(Lighting)	
Clothes Dryer	4	(Misc.)	
Dishwasher	1	· 在日本市地址、市地区、高大学生、	
Disposal		FLOOD AND AREA LIGHTING	NO.
Furnace	4	100 to 300 Watt	
Venthoods	٩.	400 to 1,000 Watt	
Fans - bath & exhaust	2	and the second	
	· · · · · · · ·	MISC.	NO.
GASOLINE DISPENSING PUMP	NO.	Swimming Pools	
(Lamp and Motor)		Mobile Homes	3
		Sub Feeds	
X-RAY MACHINES	NO.	Florescent Fixtures	10
Wiring & Connection		Elevators	
Briefly Summarize the Job:Instal	outlets	a lightrag	
4		0	
(Estimated Job Cost)	•	(Permit Fee) 🌐 🏘 12	4
Signature of Applicant:	m	Date:	9/20/21

*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*.*



21-387 Permit # 912 Date:

HVAC PERMIT APPLICATION

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

Property Address:	1400 Bolhanne	on RD. Fa	18/2013 30213
Property Owner:	Escu Rubio		
	Tanta TEMP. HUR		CR108837
Address of Contractor:	3-39 Mink WAY	Telephone #:	04 786 4511
Heating Units		Refrig/AC Units	
# of Units	1	# of Units	l l
Name		Name	
Model #		Model #	
BTU	100 KS-	Tons	& tons.
Heat Loss		Heat Gain	· · · · · · · · · · · · · · · · · · ·
CFM		CFM	
Fans		Grease Hoods	
# of Units		# of Units	
H.P.		Sq. Feet	****
CFM		Size of Vent	
<u>}</u>		CFM Required	
Gas Pine		Gas Range	

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

Matified dect use FORIS HAVAC S difin Briefly Summarize the Job: 124 \$ (Estimated Job Cost) (Permit Fee) Date: Signature of Applicant:

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.

		DEGETAEW	10
FAIRBURN	FAIRBURN CITY HALL 56 MALONE ST FAIRBURN, GA 30213	SEP 1 6 2021	Permit # 21-388
With a large	(770)964-2244 Fax (770)306-6919	BY:	Date: $9/20/2.($
		Repairs/17/ferations	

-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: <u>American Toy</u>	verJob Lo	cation Addres	s: _7445 Gr	aham Road	
Subdivision	Lot #	09F110000440455	Zoning Di	strict	
General Contractor:Towers	ite Servcies		GA Lic #:	L20090056	1
Address: _167 Tidwell Drive A	lpharetta GA 30004				
Phone Number _770-521-1300) Cell #:		Fax #:		
Width of Lot:		Heated Fl	oor Area:		
Lot Size (sq. ft.)	N/A	Total Floo	r Area:	N/A	
Front Yard Set-Back	Side Yard Set-Back			Set-Back	
Exterior Walls (circle)	Combination Wood Stu	cco Stone M	asonry Brick	Hardiplank	Vinyl
Circle One	Sewa	age N/A	Septic		
Type/Style of house plans submit	ted:				
Estimated Cost to Build: \$ 10,00	0 Es	timated Sales	Price: \$	N/A	

Apartments/Multi-Family:

Total No. of Buildings		No. of Rooms in Each		
Total No. of Units	N/A	No. of Bedrooms	N/A	

Subcontractors:		
Electrical	Phone:	
Plumbing	Phone:	1 Å
HVAC ,	Phone:	
NOTE: All Sub-Contractors Must Bo State Licensed And Must Bormi	t Each Joh Pomonally Proof of license is required	

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

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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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: Blake Sailors DATE9/15/21 / 706-621-0306 / blake@telecom-development.com						
Plan Approval	H Stakes	Permi	it Approval	Stalle Date 9/26/21		
Temporary Pole	\$		Permanent Electric	c \$		
Utility Deposit	\$	Water Tap	\$	Sewer Tap \$		
\$	Plan Review \$	36.00	Permit Fee	\$ 80.00		
TOTAL AMOUNT PAID \$ 116 DATE SUBMITTED TO UTILITY COMPANY						
Electric Meter #	1. 2	Reading		Demand		
Water Meter #		Reading		Read By:		



BY:

Permit #	21-389
Date:	9-21-21

PLUMBING PERMIT APPLICATION

WARNING: Permits will NOT be issued unless indicated information is shown hereon. Applicant is held responsible for all sewer and water lines on private property.

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

Stre-e-2000 Property Address:

Property Owner:

Job Type	Check	Location Type	Check	Sewer Type	Check
New	/	Residential	/	City Sewer	
Add-on	V	Commercial	V	County Sewer	

Plumbing Contractor: _	Gary	Mckinne	<u>/</u> M;	aster License #	: Mp209446
Address of Contractor:		sine knotch	20135	Гelephone:	04 425 862 B

ltem	Quantity	Item	Quantity
Area Surface Drain		Laundry Tub	
Backflow Preventor		Roof Drain	
Bar Sink		Sewer	
Basin		Shower	
Bidet		Sink	2
Dishwasher		Slop Sink	A
Disposal		Tub/Bath	
Drinking Fountain		Urinals	
Floor Drain		Use for (Concealed Gas Pipe)	
Fresh Air Trap		Washing Machine	
Furnace Opening		Water Closet	1
Hub Drain		Water Heater (200K BTU & Over)*	
HVAC Trap		Water Line	<i>n</i>
Interceptor			

*200K and above require installation permit from the Georgia Department of Labor

Briefly Summarize the Job: <u>Cough</u> FN	Toilet	Laugtory	1 thaterback
(Estimated Job Cost) 240 0	(Permit Fee)	\$ 56	
Signature of Applicant:	Date:	09-21-	2/

For all inspectionscall (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.

	OF FAIR ST
5	and B
annu s	1854 11555

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

(Cł	<u>]</u> 2	<u>]{</u>	所 18		
EP	2	1	W 18 2021	IJ	

Permit #	21-390
Date:	9/21/21

REPAIRS/ALTERATIONS PERMIT APPLICATION

BY:

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 71 Roberts St	_Subdivision	Lot #
Property Owner: WA Chamber JI.	Zoning Classification _/	1.2
Type of plans submitted <u>Roaf Replanet</u>	Construction to be started no	later than
Estimated Building Cost: \$ 4,000		
Describe work being done: <u>Root Replacement</u>		

Width of Lot:		Width of Building:		
Depth of Lot:		Length of Building:		
Type of Sewage:		Total Floor Area:		
Material of Roof:	Roat	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: 11.11.2m Chamber	(Juner)	GA Lic #:
Address: 71 Reserfe St		
Phone Number 678-409 0704	Cell #:	

Subcontrac	tors:
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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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. . 1 11

CONTRACTOR/OWNER SIGNATURE: MA Child	DATE 9-21-2

Plan Approval

___ Permit Approval _____ Date _____

62 TOTAL PERMIT FEE:

For Inspections Call 770-964-2244 ext. 401





Permit #	21-391
Date:	9/28/21

BY: 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 340 Palm Springs Cir	SubdivisionDurham Lakes	Lot #
		Lot #
Property Owner: Toya Thomas	Zoning Classification PD	
Type of plans submitted Fence Installation	Construction to be started no later than 09/22/2021	
Estimated Building Cost: \$2750		
Describe work being done: Installing a 6FT Privacy Fence		

Width of Lot:	n/a	Height of Fence:	6ft	
Depth of Lot:	n/a	5		
Material of Fence:	Pressure Treated Pine			

General Contractor: Bravo Fence Company	Bus Lic #: 0079838
Address: 1190 Hayes Industrial Dr, Marietta, GA	
Phone Number 7709559970	Cell #:

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 <u>No</u> 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:_	Afre	_DATE _	09/20/2021
Plan Approval	Permit Approval	_ Date _	9/23/21
TOTAL PERMIT FEE: \$10.00	l		
*If not approved, reason for denial:			



DECEIVED N SEP 2 4 2021



BY's

PLUMBING PERMIT APPLICATION

WARNING: Permits will NOT be issued unless indicated information is shown hereon. Applicant is held responsible for all sewer and water lines on private property.

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

	rty Address: _ rty Owner: _	52HO Wen	Lincoln Dra dy Nunlee		rburn GA	30213
	Job Type	Check	Location Type	Check	Sewer Type	Check
	New		Residential hedore	\sim	City Sewer	V
	Add-on		Commercial		County Sewer	
Plumb Addre	ing Contracto	or: <u>bny</u> tor: <u>2219</u>	allivan/Casteel 8 Canton Rol rietta GA 300	lating 1 (ac	Master License #: <u>/</u> MMJ Telephone:	MP210486 565-5884

ltem	Quantity	ltem	Quantity
Area Surface Drain		Laundry Tub	
Backflow Preventor		Roof Drain	
Bar Sink		Sewer	
Basin		Shower	
Bidet		Sink	
Dishwasher		Slop Sink	
Disposal		Tub/Bath	
Drinking Fountain		Urinals	
Floor Drain		Use for (Concealed Gas Pipe)	
Fresh Air Trap		Washing Machine	
Furnace Opening		Water Closet	
Hub Drain		Water Heater (200K BTU & Over)*	
HVAC Trap		Water Line	
Interceptor		Water Heater	V

*200K and above require installation permit from the Georgia Department of Labor

Briefly Summarize the Jol	Bedare	Water Hea	ater	
Brieny Summanize ine ser			K FL	
(Estimated Job Cost)	400.00	_ (Permit Fee)	A 50	
Signature of Applicant:	Town Sa	Date:	9/24/2021	

For all inspectionscall (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 #	21-393
Date:	9/24/21

COMMERCIAL... BUILDING PERMIT APPLICATION

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

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Property Owner: CP TRX Fairburn, L	rn, LLC Job Location Address: 1400 Oakley Industr				strial Blvd
Project Name Terex - USA Fairburn	Lot #	Lot # 09F080000280856 Zoning District M-1			
General Contractor: Crossland Con			GA Lic #: <u>_</u>	BD	
Address: 833 S. East Ave, Columbus, K	S 66725				
Phone Number 620-429-1414	Cell #: 816-206-3	964	Fax #:		
Width of Lot:	+ or - 511.55'	Heated Floor Area:		20, 149sf	
Lot Size (sq. ft.)	239,580 SF	Total	Floor Area:	20, 1	49sf
Front Yard Set-Back 35'	Side Yard Set-Back	20'	Rear Yar	d Se	t-Back 30'
Check One	Sewag	ge 🗸	Septio	;	
Exterior Material	Masonry and Metal Panels				
Estimated Cost to Build: \$.8M				

Date of Mayor & Council		LDP # & Date of	
Approval	N/A	Approval	2021049

Subcontrac	tors:	COMMERCIAL TRADES MUST BE PERMITTE	D BEFORE	WORK BEGINS.
Electrical	TBD		Phone:	
Plumbing	TBD		Phone:	
HVAC	TBD	de la	Phone:	
NOTE: All Sub-C	ontracto	ors Must Be State Licensed And Must Permit Each Job Personally.	Proof of license i	s required.

Trade Permits: Date Trade Trade Permit # Date Permit # Other Electric TBD **HVAC** Other TBD the Plumbing Other TBD Other Other

.,

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CONTRACTOR/OWNER S		MR	DATE	5-11-2021
Plan Approval	Perm	it Approval Harry 84k	Date	9-10-2021
Temporary Pole Water Tap (Based on size) Utility Deposit	\$ \$ 3,500 \$	Permanent Electric Sewer Tap 9, 600	\$ \$ \$ (a.13	35.00
Plan Review (45% of Permit Fee) \$2,760.75 25,567.75	Fire Marshaul : \$ 302.00 Fire Alarm: \$ 50		
ید.		Fire Tup: # 3,220	(828))





BY.

Permit #	21-394
Date:	7/28/21

REPAIRS/ALTERATIONS PERMIT APPLICATION

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Subdivision	Lot #
Zoning Classification	
Construction to be started r	no later than <u>9/29/21</u>
	Zoning Classification

Width of Lot:		Width of Building:		
Depth of Lot:		Length of Building:		
Type of Sewage:		Total Floor Area:		
Material of Roof:	Asphalt shingles	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: Venture Roofing	GA Lic #:
Address: 251 Tiger Way Peachtree City, GA 30269	
Phone Number 770-946-2795	Cell #: 678-656-7482

Subcontrac	tors:
Electrical	Phone:
Plumbing	Phone:
HVAC	Phone:
NOTE: All Sub-0	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:_	ashleyda	_DATE _	9-28-21
Plan Approval	Permit Approval	Date	

Plan Approval

____ Permit Approval __

TOTAL PERMIT FEE: # 95

For Inspections Call 770-964-2244 ext. 401



-	Permit # 21-395
	Date: 9/29/21

BT: ELECTRIC PERMIT APPLICATION

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

Property Address: 71 Do	DD	St Fairburn GA
Property Address:		1/10 70
Property Address:	WAG	ALE SE
Contractor Address: 91 LOCKE	H S	T CULLOBER, ST SIER
Telephone: 404-454 19-	74	ССССССС <i>Силлоден, GR</i> 31016 Master License #: <u>ЕN000608</u>
METER LOOPS	NO.	MOTORS N Less than one H.P.
Metered Temp Services		1 to 5 H.P.
30 Amperes		5 1/2 to 10 H.P.
60 Amperes		10 1/2 to 20 H.P.
100 Amperes		20 1/2 to 50 H.P.
125-300 Amperes		50 + H.P.
400 Amperes		
401-599 Amperes	24	TRANSFORMERS - HEATERS
600 + Amperes Outlets-SW Recap. & Fix		FURNACES - APPLIANCES N
Oullets-Swithedap. ut in		Less than 1 K.W.
	NOT	1.0 K.W. to 3.5 K.W.
RESIDENTIAL RANGES	NO.	4.0 K.W. to 10 K.W.
Surface Unit	ĝ	10.5 K.W. to 25 K.W.
Cven Unit Combined Electrical Range		Over 25 K.W.
Combined Electrical Hange		
		SIGNS N
RESIDENTIAL APPLIANCES	NO.	(Lighting)
Water Heater Clothes Dryer		(Misc.)
Dishwasher		
Disposal		FLOOD AND AREA LIGHTING N 100 to 300 Watt
Furnace		400 to 1,000 Watt
Venthoods		
Fans - bath & exhaust		
$\sim 10^{-10}$ M ~ 10		MISC. N
START WE DEDENSING DUND	NO.	Swimming Pools
GASOLINE DISPENSING PUMP (Lamp and Motor)		Mobile Homes
(Lamp and Motor)		Sub Feeds
	NO	Florescent Fixtures
X-RAY MACHINES Wiring & Connection	NO.	Elevators
Wining & Connection		
Briefly Summarize the Job: Leghts,	Recep	stakles, vew Panel
(Estimated Job Cost) 4 6,000		(Permit Fee) 🛱 💪 🗞
		Q-20-01
Signature of Applicant: Masking	/	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.*