



Permit#

# **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.

|                                   |   | AVISON YOUNG                       | J(  | ob Locati                             | on Add     | ress: 5150 (       | OAKLE  | Y INDUSTE         | RIAL BLVD, FAIRBURN, 1   |
|-----------------------------------|---|------------------------------------|---|---------------------------------------|------------|--------------------|--|-------------------|--|
| Project Nan                       | ne CUF  | RRENT LIGHTING                     | Lot #Zoning District                        |                                       |            |                    |  |                   |  |
| General Co                        | ntracto   | or: TOYOTA MATER                   | RIAL HANDLING MIDWES                        |                                       |            | GA Lic#            |  |                   | ***  |
|                                   |   | ANTSIDE DR, LOUIS                  |   |                                       |            |                    |  |                   | ***************************************  |
| Phone Num                         |   |                                    | Cell #:                                     |                                       |            | Fax #:             |  |                   |  |
| Width of Lo                       | ot:   |                                    | -   |                                       | leated     | Floor Area         |  |                   |  |
| Lot Size (se                      |   |                                    |   |                                       |            | oor Area:          |  |                   |  |
| Front Yard                        |   | ack.                               | Side Yard Set-Ba                            | Side Yard Set-Back Rear Yard Set-Back |            |                    |  | ck .              |  |
| Check One                         | •   |                                    |   | Sewage                                |            | Se                 | ptic   |                   |  |
| Exterior Ma                       | aterial   |                                    |   |                                       |            |                    |  |                   |  |
| Estimated C                       | Cost to   | Build: \$ 11600                    | 114,800                                     |                                       |            |                    |  |                   |  |
|                                   |   |                                    |   |                                       |            |                    |  | 8                 |  |
| Date of May                       | or & C  | Council                            |   | 100                                   | # & Dat    | e of               |  |                   |  |
| Approval                          |   |                                    |   | Appro                                 | val        |                    |  |                   |  |
| O. I.                             | _   | COMMEDON                           |   |                                       |            |                    |  |                   |  |
|                                   |   | COMMERCIA                          | L TRADES MUST                               | RE PER                                | MITTEL     |                    | WOI  | RK BEG            | INS.   |
| Electrical                        | N/A   |                                    |   |                                       |            | Phone:             |  |                   |  |
| Plumbing<br>HVAC                  | N/A<br>N/A  |                                    |   |                                       |            | Phone:             |  |                   |  |
|                                   |   | ors Must Be State Lic              | ensed And Must Permit Ea                    | ach Job Per                           | sonally P  | Phone:             | s regul  | red               | iew  |
| Trade Perm                        | nits:   | ore mary 20 orate 210              | onood / the made / offine Et                | 2011 000 1 01                         | bottany. T | 1001 01 11001130   | io requi   | reu.              | Revied   |
| Trade                             |   | Permit #                           | Date  | Trac                                  | le         | D                  | ermit  | # Plan            | au Bate natio  |
| Electric                          |   | N/A                                |   | Othe                                  | r          |                    | moini Res inform   |                   |  |
| HVAC                              |   | N/A                                |   | Othe                                  | r          | * 49j              | Permit # Plan equipate main and accomments a |                   |  |
| Plumbing                          |   | N/A                                |   | Othe                                  | r          | 100                | Oktin,   | revisi            | o countingueurs  |
| Other                             |   |                                    | . Other                                     |                                       | r          | Thomas and som com |  |                   | a com Date: 1  |
| Out to t                          |   |                                    |   | Out                                   | ''         | 050                | SUP  | LEO C. LE         | MIEN   |
|                                   | AUCENA  |                                    |   |                                       |            | D/600              | dnes   | eins.             |  |
| THIS F<br>IF CONSTRUCT            | PERMIT<br>TON OR  | BECOMES NULL AN<br>WORK IS SUSPEND | ID VOID IF WORK OR CO<br>ED OR ABANDONED FO | NSTRUCTI<br>R A PERÍO                 | ON AUTH    | ORIZED IS NO       | Y TIME   | MENCED<br>AFTER W | WITHIN 6 MONTHS, OR  |
|                                   |   |                                    | xamined this applicat                       | -                                     |            | 11.                | 840  |                   |  |
| laws and ordin                    | nances  | governing work p                   | performed under this                        | permit wil                            | I be com   | plied with w       | hethe  | r specifie        | d herein or not. The   |
| granting of a B                   | Building  | g Permit does not                  | presume to give auth                        | ority to vi                           | olate or   | cancel the p       | rovisi   | ons of an         | y other state or local   |
| law regulating                    | constr  | ruction or the perf                | ormance of related re                       | guirement                             | s.         | 222000             |  |                   | 200 Committee (100 Co |
| CONTRACT                          | OR/O  | WNER SIGNAT                        | URF:  |                                       | ~          |                    |  | DATE              |  |
| 0011111101                        | 0140  | WILL COLONY                        |   |                                       |            |                    |  | DAIL_             |  |
| DI A                              |   | KA .                               |   |                                       | 15.        |                    | ALC: Yes   |                   | 10/00  |
| Plan Approv                       | val   | au                                 | Permit App                                  | oroval                                | 12/1       |                    |  | _ Date _          | 12/5/22  |
| Temporary Po                      |   | \$                                 |   | nanent Ele                            | ectric     |                    | \$   |                   |  |
| Water Tap (Ba                     |   |                                    |   | er Tap                                |            |                    | \$   |                   |  |
| Utility Deposit<br>Plan Review (4 |   | Permit Fee) \$                     |   | nit Fee                               |            |                    | \$   | 1,63              | 4.00   |
| . Aut Hoviow (                    | .5 /0 01  | (B)                                | AL OF                                       | ic mona                               | Short      | Pec, &             | 50   |                   |  |
| TOTAL AMOU                        | TOTAL AMOUNT PAID \$517.80 Fire Monthall Fee: \$50  Homin Fee: \$25 |                                    |   |                                       |            |                    |  |                   |  |
|                                   |   |                                    |   | MIN V                                 | ac.        | 425                |  |                   |  |
|                                   |   |                                    |   |                                       |            |                    |  |                   |  |
|                                   |   |                                    |   |                                       |            |                    |  |                   |  |



Permit # 23-602

Date: 1/4/23

## **HVAC PERMIT APPLICATION**

| Notice: This form must be completed, s                                      | signed and submitted before work    | c may commence.                       |
|---|-------------------------------------|---------------------------------------|
| Property Address: 935 FEL   | LOWSHIP ROAD                        | 30213                                 |
| Property Owner: McCKEY  | TURNER                              |                                       |
| HVAC Contractor: COOLRAL  | 1 Master License #                  | : <u>CNZ09509</u>                     |
| Address of Contractor: 1787 WILL MARIETTA, 6                                | LIAMS DR Telephone #: _             | 104-512-0641                          |
| MARIOTIMI   | 1                                   |                                       |
| Heating Units   | Refrig/AC Units                     |                                       |
| # of Units  | # of Units                          |                                       |
| Name  | Name                                | CARRIER                               |
| Model #   | Model #                             | 25HPB636H003                          |
| BTU   | Tons                                |                                       |
| Heat Loss   | Heat Gain                           |                                       |
| CFM   | CFM                                 |                                       |
| AIR HANDLER   |                                     |                                       |
| Fans FX4DNF037  | 11_00 Grease Hoods                  |                                       |
| # of Units  | # of Units                          |                                       |
| H.P.  | Sq. Feet                            |                                       |
| CFM 1200  | Size of Vent                        |                                       |
|   | CFM Required                        |                                       |
|   |                                     |                                       |
| Gas Pipe  | Gas Range<br>Outlets                | · · · · · · · · · · · · · · · · · · · |
| # of Units  | # of Outlets                        |                                       |
| Total BTU of Pipe:  |                                     |                                       |
|   |                                     |                                       |
|   |                                     |                                       |
| Paula.  | 16 L DC DISAGE TIG                  | EXISTING HVAC SYST                    |
|   |                                     | EX13/109 NUNCS13/                     |
| (Estimated Job Cost) #11483. 6  | (Permit Fee)                        | 160.00                                |
| Signature of Applicant: Kennett   | Bualda Dat                          | te: 12 29 2022                        |
| For all inspections call (770) 964-2244 e                                   | ext 401. Inspections will be perfor | rmed within 24 hours of               |
| request, excluding weekends and holidate permits subject to increased fees. | ays. Re-inspection fees: \$50.00/1  | 100.00/150.00. Late                   |



Permit # <u>23-003</u>

Date: <u>1/5/23</u>

## **REPAIRS/ALTERATIONS PERMIT APPLICATION**

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| Joh Location 5053 Ma  | eadod Trace Fairburn 30213                                  | 3 Subdivision Menday)                                | ilen Lot#   |
|---|---|--|---|
| Property Owner:   | wisen   | Zoning Classificat                                   | tion  |
| Type of plans submitted   |   | Construction to be star                              | ted no later than                                     |
| Estimated Building Cos  | t; \$ 6, 50D  |  |   |
| Describe work being do  | one: Roof replacement                                       |  |   |
|   | 3   |  |   |
| 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 S  | SIDING STUCCO STONE B                                | RICK MASONARY BRICK                                   |
|   |   |  | ,   |
| Front Yard Set-Back   |   | Side Yard Set-Back                                   |   |
| Back Yard Set-Back  |   | Side Yard Set-Back                                   |   |
|   |   |  |   |
|   |   |  |   |
| General Contractor:   | Lewis, Dream roof<br>Lawrenceville GA 30<br>552-1366        | GA Lic #:  |   |
| Address: 1938 libby   | Lawrence VIIIe GA 31  | 00 44  |   |
| Phone Number 404.   | -552-1366   | Cell #:  |   |
| Subcontractors:   |   |  |   |
| Electrical  |   | Phone:   |   |
| Plumbing  |   | Phone:   |   |
| HVAC  |   | Phone:   |   |
| NOTE: All Sub-Contractors Mu  | ıst Be State Licensed And Must Permit Ea                    | ach Job Personally. We Require Pro                   | of they are licensed.                                 |
|   |   | CONTRACTOR DEPOSIT DECI                              | UDEO EODIAN ANENDMENT O                               |
| USE OF SUBS OT  | HER THAN LISTED IN CONJUNCTI<br>APPROVAL OF THE CITY. FAILU | ION WITH THIS PERMIT REQU<br>RE TO SECURE MAY RESULT | JIRES FORMAL AMENDMENT OF<br>TIN STOP-WORK ORDER FINI |
| AND/OR OTHER MEASU  | RES, INCLUDING REVOCATION                                   | OF PERMIT AND/OR PROBA                               | ATIONARY PERIOD PRIOR TO                              |
|   | ENT PERMITS FOR BOTH THE CON                                |  |   |
|   | COMES NULL AND VOID IF WOR CONSTRUCTION OR WORK IS SU       |  |   |
| ANY TIME AFTER WORK IS  |   | SI ENDED ON ABANDONED I                              | CRATERIOD OF SIMORITION                               |
|   |   |  |   |
| I hereby certify that I ha  | ave read and examined this app                              | plication and know the san                           | ne to be true and correct. A                          |
|   | ordinances governing work per                               |  |   |
|   | . The granting of a Building P                              |  |   |
| requirements.   | of any other state or local law                             | regulating construction of                           | r the performance of relate                           |
| And place - • On the control of the | 21  |  |   |
| CONTRACTOR/OWNE   | ER SIGNATURE: <u>Glen</u>                                   | wison  | DATE <u>/-5-2028</u>                                  |
| Plan Approval   | Permit Anni   | roval  | Date  |
| TOTAL PERMIT FEE:   |   |  |   |
| TOTAL PERMIT FEE:   | r 1/0.00  |  |   |

For Inspections Call 770-964-2244 ext. 401





B. L. c secrece contraction con

Permit # <u>23-004</u>

Date: <u>11812023</u>

# COMMERCIAL BUILDING PERMIT APPLICATION

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| Project Nam<br>General Cor  | e <u>Sout</u><br>ntracto<br>00 Cobb | hpark Build<br>or: The Eve<br>Galleria Pk | ing B<br>ergreen C<br>wy. Suite | Trust c/o Clarion Pa<br>Corporation d/b/a Evo<br>240. Atlanta GA 30 | Lot<br>ergreen Cons | #_33 & 34<br>struction | G           |  | ing D         | Distri<br>CO00 | ct <u>9F</u><br>16354 | irburn, GA 30213                      | _ |
|---|-------------------------------------|---|---------------------------------|---|---------------------|------------------------|-------------|--|---------------|----------------|-----------------------|---------------------------------------|---|
| Width of Lo   | t:                                  |   |                                 | 851'  |                     | Heated                 | d Floo      | or Area  | 1: 2          | 206,9          | 60 semi               | i-heated                              |   |
| Lot Size (so  | . ft.)                              |   |                                 | 449,548   |                     | Total F                | Floor       | Area:  | 2             | 206,9          | 60                    |                                       |   |
| Front Yard  |                                     | ack 40                                    |                                 | Side Yard Se  | et-Back             | 20                     |             | Rear Yard Set-Back 30  |               |                |                       |                                       |   |
| Check One   |                                     |   |                                 |   | Sev                 | /age ✓                 |             | Se   | ptic          |                |                       |                                       |   |
| Exterior Ma   | terial                              | -   |                                 | <i>L</i>  | / a ann             | Painte                 | d Conc      | crete Panels   |               |                |                       |                                       |   |
| Estimated C   | ost to                              | Build: \$                                 | 13,900,00                       | 14, 690   | ,269.0              | 30                     |             |  |               |                |                       |                                       |   |
|   |                                     |   |                                 |   | 0 1                 |                        |             |  |               |                |                       |                                       |   |
| Date of May   | or & C                              | Council                                   | 07/40/00                        |   | L                   | DP # & Da              | ate of      |  |               |                |                       |                                       |   |
| Approval  |                                     |   | 07/12/22                        |   | A                   | pproval                |             |  |               |                |                       |                                       |   |
|   | TO SHOW WE SAME                     |   |                                 | 20 ab 4 2 N 20 8 ab 192 a 2 7 7 1 7 3 8 a                           |                     |                        | NEA YEAR IS | O THE PARTY OF THE | 2007/00/00    | DOT VEN        |                       |                                       |   |
| Subcontrac  | tors:                               | COMM                                      | ERCIA                           | L TRADES M  | UST BE I            | PERMITTE               | ED BE       | FORE   | WO            | RK             | BEGI                  | NS.                                   | _ |
| Electrical  | Ace El                              | ectric, Inc.                              |                                 |   |                     |                        | Ph          | one:   | 404-2         | 275-90         | 082                   |                                       |   |
| Plumbing  | Sluss                               | & Padgett                                 |                                 |   |                     |                        | Ph          | one:   | 678-3         | 314-50         | 655                   |                                       |   |
| HVAC  |                                     | ate Mechani                               |                                 | 140   |                     |                        |             | one:   | 770-3         |                | 228                   |                                       |   |
|   |                                     | ors Must Be                               | State Lic                       | censed And Must Pe  | ermit Each Jo       | b Personally.          | Proof o     | of license   | is requ       | iired.         |                       |                                       |   |
| Trade Perm  | its:                                |   |                                 |   |                     |                        |             |  |               |                |                       | D (                                   |   |
| Trade   |                                     | Peri                                      | nit#                            | Date  |                     | Trade                  |             |  | Permit # Date |                |                       | Date                                  |   |
| Electric  |                                     |   |                                 |   |                     | Other                  |             |  |               |                |                       |                                       |   |
| HVAC  |                                     |   |                                 |   | Other               |                        |             |  |               |                |                       |                                       |   |
| Plumbing  |                                     |   |                                 | Other   |                     | Other                  |             |  |               |                |                       |                                       |   |
| Other   |                                     |   |                                 |   |                     | Other                  |             |  |               |                |                       |                                       |   |
| Otiloi  |                                     |   |                                 |   |                     |                        |             |  |               |                |                       | · · · · · · · · · · · · · · · · · · · |   |
| 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 10/18/2022 |                                     |   |                                 |   |                     |                        |             |  |               |                |                       |                                       |   |
| Plan Appro  | val                                 | MIN                                       | <b>.</b>                        | Perm  | it Approv           | nt Electric            | JEL .       | omplia   | nce           | [              | Date _                |                                       |   |
| Temporary Po  | lo.                                 | U   | 1 ¢                             |   | Parmana             | nt Flection            | code (      | News A.  | 4             | <b>k</b>       |                       |                                       |   |
| Water Tap (Ba   |                                     | size)                                     | \$                              | SULD  | Sewer Ta            | an Electric            |             |  | 9             | 5 0            | 1;600                 | ′)                                    |   |
| Utility Deposit   |                                     | · Oillo                                   | \$                              | 400.00  | Permit F            |                        |             |  | 4             | 5 4            | 6,92                  | 00,00                                 |   |
| Plan Review (4  |                                     | Permit Fe                                 | ee) \$                          | 23,460-00   | 1,400               | ·                      | 1011        | , 0  |               |                |                       | -                                     |   |
|   |                                     | As  | 111 /                           | 11 71   | 1(1)                | guston                 | (2)         | . P4   | W O           | , C            | 0                     |                                       |   |
| TOTAL AMO   | UNTP                                | AID W                                     | 111,                            | 011.76  | Fm                  | c Tup                  | IBAI        | 0 3.   | ,96           | 0.             | CU                    |                                       |   |
|   |                                     |   |                                 |   | 17                  | Thy Dep                | rosii       | 54   | ico.          | . ળ            | ,                     |                                       |   |
|   |                                     |   | Advance Fiel \$ 25.00           |   |                     |                        |             |  |               |                |                       |                                       |   |



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

DEC 1 5 2022

Permit # 23-005

Date:

# Electric, Mechanical and Plumbing Permit Application

| Property Owner: Eleven See IT 2, LLC   |
|--|
| Location Address: 602 Bohannon Road, Fairburn, GA 30213  |
| Contractor: Penco Electrical Contractors, Inc  |
| Address: 1087 Citizens Pkwy, Morrow, GA 30260 Email: ekline@pencoelectric.com  |
| Street (770) 960-7223 City, ZIP License#: EN 214 638   |
| Information on Project: (✓All That Apply)  ☐ Residential (1 or 2-Family Dwelling)  ☐ Residential (2 or 2-Family Dwelling)  |
| System Modifications  ☐ Electrical ☐ Mechanical ☐ Plumbing ☐ Water/Sewer   |
| ☐ Electric Service ☐ New service ☐ Upgrade Service ☐ Repair Service ☐ Amps. 150 ☐ Utility Co. Fairburn Electric Company  |
| <ul> <li>☐ Mechanical Change Out</li> <li>☐ New Mechanical</li> <li>☐ Low Voltage</li> <li>☐ New Electric Circuits</li> <li>☐ Plumbing Repair</li> <li>☐ New Plumbing</li> <li>☐ Water Heater</li> <li>☐ Gas Service</li> <li>☐ New Gas Piping</li> <li>☐ Other</li> </ul> |
| Detail of Work: Install 150 Amp nema 3r Meter/Panel Combo for  |
| 5.te lighting and new gate metor. Install underground  |
| conduits, wire for all pole lights and gate motor.   |
| 3 20 Amp circuits in new penel. Install light poles and lights   |
| Estimated Construction Cost 119,648.33 Permit Fee Project 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: 5

Show Willie

This is to certify that I will personally supervise this installation

DATE: 12/14/22



| Permit # | 23-04   |
|----------|---------|
| Date:    | 1/10/23 |

REPAIRS/ALTERATIONS PERMIT APPLICATION

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| Permit# | 23-007  |
|---------|---------|
| Date:   | 1/10/23 |

## REPAIRS/ALTERATIONS PERMIT APPLICATION

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| Job Location 399 (a   | verzoun Rd.                            | _Subdivision                                   | Lot #                        |  |  |  |
|---|--|--|------------------------------|--|--|--|
| Property Owner: Colina  | + Perry Guynn                          | Zoning Classification                          |                              |  |  |  |
| Type of plans submitted                                       | ,                                      | Construction to be started no later than       |                              |  |  |  |
| Estimated Building Cost: \$                                   | (0,000,0)                              |  |                              |  |  |  |
| Describe work being done: _                                   | Replace 200                            | K  |                              |  |  |  |
|   | V                                      |  |                              |  |  |  |
| 120.00 2.   |  | 145 141 CD 1111                                |                              |  |  |  |
| Width of Lot:   | X                                      | Width of Building:                             | X                            |  |  |  |
| Depth of Lot:   | X.                                     | Length of Building:                            |                              |  |  |  |
| Type of Sewage:   | X                                      | Total Floor Area:                              | -5-                          |  |  |  |
| Material of Roof:   | SHINGLES                               | Heated Floor Area:  <br>SIDING STUCCO STONE BR | X DICK MASONABY BRICK        |  |  |  |
| Walls- Siding (circle)  | WOOD COMBINATION                       | SIDING STUCCO STONE BE                         | RICK WASONART BRICK          |  |  |  |
|   |  |  |                              |  |  |  |
| Front Yard Set-Back   | X                                      | Side Yard Set-Back                             | X                            |  |  |  |
| Back Yard Set-Back  | ×                                      | Side Yard Set-Back                             | $\times$                     |  |  |  |
|   |  |  |                              |  |  |  |
|   |  | O A 1 : - #:                                   | 300001                       |  |  |  |
| General Contractor:  Address:  Phone Number 110, 3            | ST MANK JEDDENC                        | GA LIC #.                                      | 72000                        |  |  |  |
| Address: 7,9 1) x   | 1980 DOUGLASU                          | MIR (04) 1121                                  |                              |  |  |  |
| Phone Number 1140, 3  | 18,1991                                | Cell #:  |                              |  |  |  |
|   |  |  |                              |  |  |  |
| Subcontractors:   |  | Dhana  |                              |  |  |  |
| Electrical  | /                                      | Phone:   |                              |  |  |  |
| Plumbing  |  | Phone:   |                              |  |  |  |
| NOTE: All Sub-Contractors Must Be S                           | tate Licensed And Must Permit Fa       |  | f they are licensed.         |  |  |  |
| NOTE: All Gub-Contractors Must be o                           | tate Elections of Alla Mast 1 chill Ed | on our croomany. The hospital of the           |                              |  |  |  |
| USE OF SUBS OTHER T   | HAN LISTED IN CONJUNCTI                | ON WITH THIS PERMIT REQUI                      | RES FORMAL AMENDMENT OF      |  |  |  |
| THE PERMIT AND PRIOR APPR                                     | OVAL OF THE CITY. FAILU                | RE TO SECURE MAY RESULT                        | IN STOP-WORK ORDER, FINE     |  |  |  |
| AND/OR OTHER MEASURES,<br>APPROVAL OF SUBSEQUENT PE           | INCLUDING REVOCATION                   | OF PERMIT AND/OR PROBA                         | TIONARY PERIOD PRIOR IC      |  |  |  |
| THIS PERMIT BECOME  | S NULL AND VOID IF WOR                 | K OR CONSTRUCTION AUTH                         | ORIZED IS NOT COMMENCED      |  |  |  |
| WITHIN 6 MONTHS, OR IF CONS                                   | TRUCTION OR WORK IS SU                 | SPENDED OR ABANDONED FO                        | OR A PERIOD OF 3 MONTHS AT   |  |  |  |
| ANY TIME AFTER WORK IS STAF                                   | RTED.                                  |  |                              |  |  |  |
| I I was been assettly the A I been asset                      | ad and arranginged this and            | elication and know the com                     | a to be two and correct Al   |  |  |  |
| I hereby certify that I have re provisions of laws and ordina | ad and examined this app               | oncation and know the same                     | ill be complied with whether |  |  |  |
| specified herein or not. The                                  | granting of a Building F               | Permit does not presume to                     | give authority to violate of |  |  |  |
| cancel the provisions of any                                  | other state or local law               | regulating construction or                     | the performance of related   |  |  |  |
| requirements.   |  | 9  | 1                            |  |  |  |
| 30 to 33 • solution - 1000 10 cots 30                         |  |  |                              |  |  |  |
| CONTRACTOR/OWNER SIG  | GNATURE:                               |  | DATE                         |  |  |  |
| Plan Approval   | Permit Appı                            | oval   | Date                         |  |  |  |
| TOTAL PERMIT FEE:   | 75.00                                  |  |                              |  |  |  |
| _/\   |  |  |                              |  |  |  |

For Inspections Call 770-964-2244 ext. 401





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.

|  |  | A CONTRACTOR OF THE PARTY OF TH |  |
|--|--|--|--|
| Job Location 94 Vickery Dr Fairbur                         | n GA 30213 Unit 1  | _Subdivision   | Lot #  |
| Property Owner: Thron Holding L                            | LC   | Zoning Classific   | ation  |
| Type of plans submitted Archite                            | arted no later than 1/15/23  |  |  |
| Fetimated Building Cost: \$83.                             | 7K   |  |  |
| Describe work being done: _\bar{\textsup}                  | lew roofing 3 tab shingles, upgrad   | de Kitchen, Upgrade bathroom, ne   | w siding, upgrade Electrical                               |
| and interior/exterior painting                             |  |  |  |
|  |  |  |  |
| Width of Lot:  | Existing structure   | Width of Building:   | 41'  |
| Depth of Lot:  | Existing structurre  | Length of Building:  | 36'  |
| Type of Sewage:  | City   | Total Floor Area:  |  |
| Material of Roof:  | Asphalt  | Heated Floor Area:   | 1,773 sf   |
| Walls- Siding (circle)                                     | WOOD COMBINATION   | SIDING STUCCO STONE  | BRICK MASONARY BRICK                                       |
|  |  |  |  |
| Frank Vand Cat Dook  | Settle or Oten Letture   | Side Yard Set-Back   | Existing structure   |
|  | isting Structure   | Side Yard Set-Back   | Existing Structure   |
| Back Yard Set-Back Ex                                      | isting Structure   | Side Tald Det-Dack   | Existing Chastary  |
| *  |  |  |  |
| General Contractor: Trimen B                               | Enterprises  | GA Lic ?   | #: RBQA004080  |
| Address: P.O. Box 272 Powder Sp                            |  |  |  |
| Phone Number   | 7.1.60 - 2.1.01.   | Cell #: 678-438-2461   |  |
| Thone Number   | WANTE LOVE - COMPANY - COM |  |  |
| Subcontractors:  |  |  |  |
| Electrical   |  | Phone:   |  |
| Plumbing   |  | Phone:   |  |
| HVAC   |  | Phone:   |  |
| NOTE: All Sub-Contractors Must Be S                        | tate Licensed And Must Permit E  | ach Job Personally. We Require I   | Proof they are licensed.                                   |
|  |  |  | OLUBER FORMAL AMENDMENT OF                                 |
| USE OF SUBS OTHER T  | HAN LISTED IN CONJUNCT   | ION WITH THIS PERMIT RE  | QUIRES FORMAL AMENDMENT OF<br>JLT IN STOP-WORK ORDER, FINE |
| AND/OR OTHER MEASURES                                      | INCLUDING REVOCATION   | OF PERMIT AND/OR PRO   | DBATIONARY PERIOD PRIOR TO                                 |
| APPROVAL OF SUBSECUENT PI                                  | FRMITS FOR BOTH THE CO   | NTRACTOR AND UNAUTHO   | RIZED SUB-CONTRACTOR.                                      |
| THIS PERMIT RECOME   | S NULL AND VOID IF WO  | RK OR CONSTRUCTION AU  | ITHORIZED IS NOT COMMENCED                                 |
| WITHIN 6 MONTHS, OR IF CONS<br>ANY TIME AFTER WORK IS STAI | TRUCTION OR WORK IS SU   | DSPENDED OR ABANDONEL  | FOR A PERIOD OF 3 MONTHS AT                                |
| ANT TIME AFTER WORK IS STAI                                | VIED.  |  |  |
| I horoby cortify that I have re                            | and and examined this ar   | nolication and know the s  | ame to be true and correct. All                            |
| provisions of laws and ordina                              | ances governing work be  | erformed under this permi  | it will be complied with whether                           |
| specified herein or not. The                               | granting of a Building   | Permit does not presume  | e to give authority to violate or                          |
| cancel the provisions of any                               | other state or local lay   | v_regulating construction  | or the performance of related                              |
| requirements.  |  | ,  | - (  |
|  | 011 10 C//100  | 1 donne  | DATE 17/22/22  |
| CONTRACTOR/OWNER, SI                                       | GNATURE:   | o mreg   |  |
| 15   | Permit App   | Seviel   | ped Date   |
| Plan Approval  | Permit App   |  |  |
| TOTAL PERMIT FEE:  | 00600  | JAN 0  | 5 2023   |
|  | J  | for code co  | mollance   |
| For Inspections Call 770-964                               | -2244 ext. 401   | 10% Cons or  | - 4000   |
| Permit: \$ 831 M   | > 1 Plan Review  | 1: 05 180   Adm  | m Fee: \$25.00   |





BY: .....

Permit # 23 - COS4

Date: 1110/23

# ACCESSORY 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: Charles Lan  | mbert Job Loca  | tion Address:                           | 440 Waterboy Rd, Fairburn, GA 30213                 |  |  |  |  |
|--|---|---|---|--|--|--|--|
| Subdivision Southern Pines   | Lot #   | 72 Zo                                   | Zoning District9F                                   |  |  |  |  |
| General Contractor:  |   |   |   |  |  |  |  |
| Address:   |   |   | -   |  |  |  |  |
| Phone Number   | Cell #: 404-408   | -7405 F                                 | ax #:   |  |  |  |  |
|  |   |   |   |  |  |  |  |
| Width of Lot:  | 986 Ft  | Heated Floor                            |   |  |  |  |  |
| Lot Size (sq. ft.)   | 16,344 SQ FT  | Total Floor Ar                          |   | 1529 SQ FT   |  |  |  |
| Front Yard Set-Back 35   | Side Yard Set-Back Combination Wood Stuck                     |   | Rear Yard Set-Back 10 Masonry Brick Hardiplank Viny |  |  |  |  |
| Exterior Walls (circle)  | _   | o Stone Wason                           | гу впск   | нагоіріапк   | Vinyl                                    |  |  |
| Estimated Cost to Build: \$  | 500   |   |   |  |  |  |  |
|  |   |   |   |  |  |  |  |
| ELECTRIC, P  | LUMBING, AND HVAC MUS   | T BE PERMITTE                           | D SEPAR   | ATELY  |  |  |  |
| THIS PERMIT BECOMES NULL AND MONTHS, OR IF CONSTRUCTION OF AFTER WORK IS STARTED.  | VOID IF WORK OR CONST<br>WORK IS SUSPENDED OR A               | RUCTION AUTHO<br>ABANDONED FOR          | RIZED IS I<br>A PERIOD                              | NOT COMMENO<br>OF 3 MONTHS                         | CED WITHIN 6<br>3 AT ANY TIME            |  |  |
| Accessory buildings shall not exc<br>combined total of all accessory be<br>floor area of the principal building<br>buildings shall be set back at lea<br>district. | ouildings on a lot exceed to<br>g. Calculation of the floor a | ne greater of 1,5<br>area shall not inc | 00 square   | feet in area oment areas.                          | or 25% of the<br>All accessory           |  |  |
| An accurate survey of the proper principal dwelling location, and lo   | erty must be submitted wi<br>cation of proposed access        | th this applicati<br>ory building.      | on that re  | eflects the lot                                    | dimensions,                              |  |  |
| I hereby certify that I have read a<br>provisions of laws and ordinance<br>specified herein or not. The grant<br>the provisions of any other state of              | es governing work perform<br>ting of a Building Permit do     | ned under this p<br>oes not presume     | ermit will<br>to give au<br>erformand               | be complied<br>uthority to vio<br>ce of related re | with whether late or cancel equirements. |  |  |
| CONTRACTOR/OWNER SIGNA   | TURE:   |   |   | DATE 01  | 06/23                                    |  |  |
| Plan Approval  | Permit Approval   | Duis                                    |   | _ Date   |  |  |  |
| Plan Review \$   | Permit \$   | \$ 100                                  | <u>u</u> _  |  | d  |  |  |
|  | Permit!   | 75.60                                   | P   | Reviewe<br>Code Compl                              | iance                                    |  |  |
|  |   | a: \$250                                | By For  | Lode Compo   | 1/9/23                                   |  |  |



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

Permit # 23 -010

Date: 1/11/23



# Electric,

| lechanical and Plumbing  |  |  |  |
|--|--|--|--|
| ermit Application  |  |  |  |
| Property Owner: Por ex   |  |  |  |
| ocation Address: 500 BOHANNON RD. FAIRBURN, GA 30213   |  |  |  |
| Contractor: ADT  |  |  |  |
| address: 3890 DERALS TECHNOLGY BLWY DOPPHILLE Email: Mario moore @ adt. com  |  |  |  |
| Street   City,   ZIP   License#:   LVA 2063  |  |  |  |
| 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  |  |  |  |
| <ul> <li>☐ Mechanical Change Out</li> <li>☐ New Mechanical</li> <li>☐ Low Voltage</li> <li>☐ New Electric Circuits</li> <li>☐ Plumbing Repair</li> <li>☐ New Gas Piping</li> <li>☐ Other</li> </ul>  |  |  |  |
| Detail of Work: Additional Fine Alarm Work. Porex adding area  |  |  |  |
| Detail of Work: Additional Fire Alarm Vork. Porex adding area to building.   |  |  |  |
| J  |  |  |  |
|  |  |  |  |
| Estimated Construction Cost \$7,343.00 Permit Fee \$375.60   |  |  |  |
| 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 CICAL TURE MANA PATE 11-28-22   |  |  |  |

CONTRACTOR SIGNATURE:

This is to certify that I will personally supervise this installation



For Inspections Call 770-964-2244 ext. 401

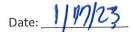
| Permit# | 23- | OII |
|---------|-----|-----|
| Date:   | 113 | 123 |

## REPAIRS/ALTERATIONS PERMIT APPLICATION

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| Job Location 430 Water   | erbox Kd Su                              | bdivision  | Lot #  |  |  |
|--|--|--|--|--|--|
| Property Owner:  | MA. Johnson                              | Zoning Classification  |  |  |  |
| Type of plans submitted Construction to be started no later than |  |  |  |  |  |
| Estimated Building Cost: \$5                                     | ROOM -                                   |  |  |  |  |
| Describe work being done: 🔏                                      | COO POULACING                            |  |  |  |  |
| ,  |  |  |  |  |  |
|  | -  |  |  |  |  |
| Width of Lot:  |  | dth of Building:   |  |  |  |
| Depth of Lot:  |  | ngth of Building:  |  |  |  |
| Type of Sewage:  |  | tal Floor Area:  |  |  |  |
| Material of Roof:  |  | ated Floor Area:   |  |  |  |
| Walls- Siding (circle)   | WOOD COMBINATION SIDIN                   | IG STUCCO STONE BRICK MA   | SONARY BRICK   |  |  |
|  |  |  |  |  |  |
| Front Yard Set-Back  | - Si                                     | de Yard Set-Back   |  |  |  |
| Back Yard Set-Back   |  | de Yard Set-Back   |  |  |  |
| Back fard Set-Back   | 31                                       | de Tard Set-Dack   |  |  |  |
|  |  |  |  |  |  |
| General Contractor; Hay  | ne Owner,                                | GA Lic #:  |  |  |  |
| Address: 430 Water bo  | xx kd tripping).                         | A 30213  |  |  |  |
| Phone Number 4 374-4   | LIUZ Ce                                  |  |  |  |  |
| Filone Number 4 1977   | 776                                      | II II .  |  |  |  |
| Subcontractors:  |  |  |  |  |  |
| Electrical   |  | Phone:   |  |  |  |
| Plumbing   |  | Phone:   |  |  |  |
| HVAC   |  | Phone:   |  |  |  |
| NOTE: All Sub-Contractors Must Be St                             |  | b Personally. We Require Proof they are                          | e licensed.  |  |  |
|  |  | ALCOHOLS AND ASSOCIATION OF THE CONTRACTOR                       |  |  |  |
| USE OF SUBS OTHER TH   | HAN LISTED IN CONJUNCTION \              | WITH THIS PERMIT REQUIRES FO                                     | RMAL AMENDMENT OF  |  |  |
| THE PERMIT AND PRIOR APPRO                                       | OVAL OF THE CITY. FAILURE 1              | O SECURE MAY RESULT IN STOPERMIT AND/OR PROBATIONAL              | DP-WORK ORDER, FINE  |  |  |
| AND/OR OTHER MEASURES, II  | REVOCATION OF REMITS FOR BOTH THE CONTRA | CTOR AND UNAUTHORIZED SUB  | -CONTRACTOR.   |  |  |
| THIS PERMIT BECOMES  | S NULL AND VOID IF WORK O                | R CONSTRUCTION AUTHORIZED  | IS NOT COMMENCED   |  |  |
|  |  | NDED OR ABANDONED FOR A PE                                       | RIOD OF 3 MONTHS AT  |  |  |
| ANY TIME AFTER WORK IS STAR                                      | TED.                                     |  |  |  |  |
|  | - I I I I 4laia ammii a                  | tion and know the same to be                                     | true and correct All   |  |  |
| I hereby certify that I have rea                                 | ad and examined this applica             | ition and know the same to be<br>ned under this permit will be o | complied with whether  |  |  |
| enecified herein or not. The                                     | granting of a Building Perm              | it does not presume to give                                      | authority to violate or  |  |  |
| cancel the provisions of any                                     | other state or local law red             | ulating construction or the p                                    | erformance of related  |  |  |
| requirements.  | and the state of four last rog           | //   | ever reactive and the transport of the second of the secon |  |  |
|  | 1  |  | A1 12 A  |  |  |
| CONTRACTOR/OWNER SIG   | SNATURE: ///aus 4.                       | Koh DA   | ATE <u>01- 15-2023</u>   |  |  |
|  |  |  |  |  |  |
| Plan Approval  | Permit Approva                           | ı  | )ate   |  |  |
| TOTAL PERMIT FEE: \$717  | 5.00                                     |  |  |  |  |





# Electric,

| Mechanical and Plumbing   |
|---|
| Permit Application  |
| Property Owner: TUE & Tames   |
| Location Address: 244 Rivertown Road  |
| Contractor: FREd James - Homeowner  |
| Address: 744 Rivertown Rd. Email:   |
| Address: 244 Rivertown I.d. Email:  Street Phone#: 679-301-8615 License#: 054808807   |
| 1101011   |
| <u>Information on Project:</u> ( ✓ All That Apply)  |
| ☐ Commercial Residential (1 or 2-Family Dwelling)   |
| System Modifications  Electrical  |
| ☐ Electric Service ☐ New service ☐ Upgrade Service ☐ Repair Service Amps Utility Co   |
| <ul> <li>☐ Mechanical Change Out</li> <li>☐ New Mechanical</li> <li>☐ Low Voltage</li> <li>☐ New Electric Circuits</li> <li>☐ Plumbing Repair</li> <li>☐ New Plumbing</li> <li>☐ Water Heater</li> <li>☐ Gas Service</li> <li>☐ New Gas Piping</li> <li>☐ Other</li> </ul>  |
| Detail of Work: BROKE MASS PiPE   |
|   |
| STORM Darrage   |
| Art   |
| Estimated Construction Cost 350-60 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: \_

DATE: 1-12-23

This is to certify that I will personally supervise this installation



Date: 01 17 2023

# Electric, Mechanical and Plumbing Permit Application

| erriticApplication   |
|--|
| Property Owner: Toey Byrd  |
| Location Address: 234 River town Rd.   |
| Contractor: AK Repair  |
| Address: 9285 Hotcherson 1' Chatt. Hill Email: Arlathan @ y ahoo. con  |
| Address: 9285 Hotcherson 1 Chatt. Hill Email: Arlethan @ y ahoo. con  Street 770-617-5549  License#: EN 2460   |
|  |
| <u>Information on Project:</u> ( ✓ All That Apply)   |
| ☐ Commercial Residential (1 or 2-Family Dwelling)  |
| System Modifications  Electrical   |
| Repair Service  Amps. 150 Amps. Utility Co. Frieden  |
| <ul> <li>☐ Mechanical Change Out</li> <li>☐ New Mechanical</li> <li>☐ Low Voltage</li> <li>☐ New Electric Circuits</li> <li>☐ Plumbing Repair</li> <li>☐ New Plumbing</li> <li>☐ Water Heater</li> <li>☐ Gas Service</li> <li>☐ New Gas Piping</li> <li>☐ Other</li> </ul> |
| Detail of Work: Storm damage - to service entrance   |
|  |
|  |
| Estimated Construction Cost 500 Permit Fee 130.00  |

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 MONTHS AT ANY TIME AFTER WORK IS STARTED.

CONTRACTOR SIGNATURE: Thomas R. Sall

DATE: 01/17 2023

## **APPROVED**

By Brian Epstein at 11:11 am, Jan 17, 2023

CILI OF PAIRBURN, GA

PERMIT # 23-014

## DATE 11/14/2022

### APPLICATION FOR DEMOLITION PERMIT

\*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 demolish a structure as described herein or shown on accompanying plan and specification.

| JOB/BUILDING LOCATION: 6029 Preserve Pass Fairburn, GA 302  | 13  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| Zoning Classification Type of Structure   | House   |  |  |  |  |  |  |
| Utilities to be disconnected: ☐ Gas [] Sewer [] Septi   | c Tank [ ] Electric [ ] Water [ ] Telephone   |  |  |  |  |  |  |
| Width of Bldg   | th of Lot Depth of Lot  |  |  |  |  |  |  |
| Demolition to be started no later than 11/23/2022 or earlier  | -   |  |  |  |  |  |  |
| Equipment used to demolish structure: Excavator   |   |  |  |  |  |  |  |
| Where will debris be hauled to: Safeguard Landfill  |   |  |  |  |  |  |  |
| ESTIMATED DEMOLITION COST \$ 6,500  |   |  |  |  |  |  |  |
| Will this project involve the removal or encapsulation of asbestos? [] Yes K No If yes, this permit may not be issued until you have presented this office with your <u>Asbestos Contracting License</u> and the <u>Notification of Asbestos Renovation, Encapsulation, or Demolition</u> from the Georgia Department of Natural Resources, Asbestos Licensing and Certification Unit, Environmental Protection Division.  Asbestos Contracting License Number: |   |  |  |  |  |  |  |
| CONTRACTO   | R:  |  |  |  |  |  |  |
| Name: Mas Reputable Demolition Services   | Phone #: 678-399-0796   |  |  |  |  |  |  |
| Address: 4418 Favored Way. Union City 30291   |   |  |  |  |  |  |  |
| OWNER:  |   |  |  |  |  |  |  |
| Name: Cheryl Clements   | Phone #:  |  |  |  |  |  |  |
| Address: 6029 Preserve Pass Fairburn, GA 30213  |   |  |  |  |  |  |  |
| THIS PERMIT BECOMES NULL AND VOID IF DEMO-<br>WITHIN 6 MONTHS, OR IF DEMOLITION IS SUSPEN<br>MONTHS AT ANY TIME AFTER WORK IS STARTED.  |   |  |  |  |  |  |  |
| I hereby certify that I have read and examined this agand correct. All provisions of laws and ordinances go permit will be complied with whether specified herein Permit does not presume to give authority to violate or local law regulating demolition or the performance CONTRACTOR SIGNATURE:  | overning work performed under this in or not. The granting of a Demolition or cancel the provisions of any other state of related requirements. |  |  |  |  |  |  |
| DAME 44/4/2022  | •   |  |  |  |  |  |  |



| Permit # | 23-015  |
|----------|---------|
| Date:    | 1/18/23 |

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.

| ED-JOVENDON TO VE  | Later Street Street Street  |                                 |  | L.                              |  |  |  |  |
|--|---|---------------------------------|--|---------------------------------|--|--|--|--|
|  |   | Way, Fairburn, GA 30213         | Subdivision                              | Lot#                            |  |  |  |  |
|  | ner: Brandywine Hor   |                                 | Zoning Classif                           |                                 |  |  |  |  |
|  | s submitted Roof  |                                 |  | tarted no later than 01/18/2023 |  |  |  |  |
|  | uilding Cost: \$776   |                                 |  |                                 |  |  |  |  |
| Describe wo  | Describe work being done: Roof replacement to replace with shingles that are GAF Royal Sovereign (Color: Charcoal-Savannah) |                                 |  |                                 |  |  |  |  |
| and ventilation re   | eplaced with Cobra III.   |                                 |  |                                 |  |  |  |  |
| Width of Lo  | 4.  |                                 | 100 M                                    |                                 |  |  |  |  |
| Depth of Lo  |   |                                 | Width of Building:                       |                                 |  |  |  |  |
| Type of Sev  |   |                                 | Length of Building:<br>Total Floor Area: |                                 |  |  |  |  |
| Material of I  |   |                                 | Heated Floor Area:                       | <del></del>                     |  |  |  |  |
| Walls- Sidir   |   | WOOD COMBINATION                |  | BRICK MASONARY BRICK            |  |  |  |  |
|  | -5 ()   |                                 | THE THE PARTY OF THE                     | - TOTAL BROK                    |  |  |  |  |
| Event Van I  | Cot Dool  |                                 |  |                                 |  |  |  |  |
| Front Yard   |   |                                 | Side Yard Set-Back                       |                                 |  |  |  |  |
| Back Yard S  | Def-Dack  |                                 | Side Yard Set-Back                       |                                 |  |  |  |  |
|  |   |                                 |  |                                 |  |  |  |  |
| General Co   | ntractor: Jason Gi  | bbs & Associates dba Gibbs Roo  | ofing and Siding GALic                   | #: HMOCC23-03071                |  |  |  |  |
|  |   | 3, Woodstock, GA 30188          | UA LIU                                   | T. 1.1.100025-00071             |  |  |  |  |
|  | ber (404) 545-6900  |                                 | Cell #: (770) 316-7727                   |                                 |  |  |  |  |
|  |   |                                 | OOII #1. (1.10) 010 1121                 |                                 |  |  |  |  |
| Subcontrac   | tors:   |                                 |  |                                 |  |  |  |  |
| Electrical   |   |                                 | Phone:                                   |                                 |  |  |  |  |
| Plumbing   |   |                                 | Phone:                                   |                                 |  |  |  |  |
| HVAC   |   |                                 | Phone:                                   |                                 |  |  |  |  |
| NOTE: All Sub-C  | Contractors Must Be Sta   | ate Licensed And Must Permit Ea | ch 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.   |   |                                 |  |                                 |  |  |  |  |
| CONTRACTO  | OR/OWNER SIG  | NATURE: / JOLOM                 | UIUDO                                    | DATE 1/18/23_                   |  |  |  |  |
| Plan Approva   | ·   | Permit Appr                     | oval                                     | Date                            |  |  |  |  |
| TOTAL PERM   | IT FEE: \$3   |                                 |  |                                 |  |  |  |  |
| For Inspectio  | For Inspections Call 770-964-2244 ext. 401  Permit \$ 300.00  |                                 |  |                                 |  |  |  |  |

Admin Fee! 8 25-00





## 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:   | Riverwood Properties   | LLC       |             | Job Lo       | ocation Add     | dress   | 8026 Se      | enola   | Rd 8     | Suite 30    | 0                     |
|---|------------------------|-----------|-------------|--------------|-----------------|---------|--------------|---------|----------|-------------|-----------------------|
| Project Name T-Mobile Lot # Zoning District                                       |                        |           |             |              |                 |         |              |         |          |             |                       |
| General Contractor: TBD Bean Team Con Struction GA Lic #: 67CC0004566             |                        |           |             |              |                 |         |              |         |          |             |                       |
| Address: 1350 Blugrass Laves Pentholy   |                        |           |             |              |                 |         |              |         |          |             |                       |
| Phone Number 678-187 - 1859 Cell #: 476-389-36 Fax #:                             |                        |           |             |              |                 |         |              |         |          |             |                       |
| Width of Lot:   |                        |           |             |              |                 |         | or Area      | :       |          | -           |                       |
| Lot Size (sq. ft.)  |                        |           |             |              |                 |         |              |         |          |             |                       |
| Front Yard Set-Back Side Yard Set-Back Rear Yard Set-Back Check One Sewage Septic |                        |           |             |              |                 |         |              | (       |          |             |                       |
| Check One   |                        |           |             |              |                 |         |              |         |          |             |                       |
| Exterior Material   |                        |           |             |              |                 |         |              |         |          |             |                       |
| Estimated Cost to   | Build: \$146,000.0     | 00        |             |              |                 |         |              |         |          |             |                       |
| 5 ( (1)   | 0                      |           |             |              | DP# & Da        | ata of  |              |         |          |             |                       |
| Date of Mayor &   | Conneil                |           |             | - 1          | .pproval        | ate Oi  |              |         |          | •           |                       |
| Approval  |                        | K         |             |              | тррточат        |         |              |         |          |             |                       |
| Subcontractors  | COMMERCIA              | L TRA     | DES MU      | ST BE        | PERMITTI        | ED BI   | FORE         | WO      | RK       | BEGI        | NS.                   |
| Electrical  |                        |           |             |              |                 |         | one:         |         |          |             |                       |
| Plumbing  |                        |           |             |              |                 | Ph      | one;         |         |          |             | _                     |
| HVAC  |                        |           |             |              |                 |         | one:         |         |          |             |                       |
| NOTE: All Sub-Contrac   | ctors Must Be State Li | censed An | d Must Perr | nit Each J   | lob Personally. | Proof   | of license i | is requ | uired.   |             |                       |
| Trade Permits:  | D                      |           | D-1-        |              | Trade           |         |              |         | • 4 11   | <del></del> | Date                  |
| Trade   | Permit #               |           | Date        |              | Other           |         | P            | erm     | 17.77    |             | Dute                  |
| Electric  | LOI Elcumica           |           |             |              |                 |         |              |         |          |             |                       |
| HVAC  | Controller Clin        |           |             |              | Other           |         |              | -       | -        |             |                       |
| Plumbing  | VIVIL Hundo            | my        |             |              | Other           |         |              |         |          |             |                       |
| Other   | J                      | 1         |             |              | Other           |         |              |         |          |             |                       |
|   |                        |           |             |              |                 |         |              |         |          |             |                       |
| THIS PERMI  | T BECOMES NULL A       | ND VOID   | IF WORK O   | R CONS       | TRUCTION AU     | THORI   | ZED IS NO    | OT CC   | OMME     | NCED        | WITHIN 6 MONTHS, OF   |
| IF CONSTRUCTION O   | R WORK IS SUSPEN       | DED OR    | ABANDONE    | D FOR A      | PERIOD OF 3     | MONT    | HS AT AN     | IY TIN  | IE AF    | TER W       | ORK IS STARTED.       |
| I hereby certify tha  | t I have read and      | examine   | d this app  | olication    | and/know t      | the sai | me to be     | true    | and      | corre       | ct. All provisions o  |
| laws and ordinance  | s noverning work       | nerform   | red under   | this per     | mit will be c   | ompli   | ed with v    | vheth   | ner s    | pecifie     | d herein or not. The  |
| granting of a Buildi<br>law regulating cons                                       | ing Permit does no     | ot presur | ne to give  | authori      | ty to violate   | or car  | icel the p   | oroyi   | sion     | s or an     | y other state or loca |
| •   |                        |           |             | 000          |                 |         |              |         |          |             | di. 11-               |
| CONTRACTOR/   | OWNER SIGNA            | TURE:     | QY          | USE          | by D            |         | 7 7          | -       | _ D      | ATE_        | 9/14/2022             |
|   |                        |           |             |              | J               | 30      | 4-641        | 1-2     | 100      |             |                       |
| Plan Approval_  | Bin                    |           | Permit      | Appro        | val 5           | ias     |              |         |          | Date        | 9/22/22               |
| Ligit White Agr   | Jairo                  |           |             | , , -lo fa   |                 | 156     |              |         |          |             |                       |
| Temporary Pole  | \$                     |           |             |              | ent Electric    |         |              |         | \$       |             |                       |
| Water Tap (Based  | on size) \$            |           | 150         | Sewer Permit |                 |         |              | -       | \$       | 1.2         | 26.00                 |
| Utility Deposit Plan Review (45%  |                        |           | .60         | _            |                 | · A' 4  | 01. 44.      |         | <u>Y</u> | 100         |                       |
|   | # n                    |           |             |              | newshoul        |         |              |         |          |             | Reviewed              |
| TOTAL AMOUNT  | PAID Pd                | 314.0     | <u>U</u>    | Hom          | in fee!         | A C     | 15,00        | د       |          |             | 20 2027               |
|   |                        |           |             |              |                 |         |              |         |          |             | SEP 22 2022           |
|   |                        |           |             |              |                 |         |              |         |          | fo          | r code compliance     |
|   |                        |           |             |              |                 |         |              |         |          | 10          |                       |





AFO

Permit # <u>28 - 617</u>

Date: 1/18/23

### 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.

| E 1 2 2 2 2                          |               | ater Place, Fairbur |                |                  |                       |  |
|--------------------------------------|---------------|---------------------|----------------|------------------|-----------------------|--|
| erty Owner:                          | _IT Hodges In | dustrial Trust, 171 | 17 McKinney Av | venue, Suite 190 | 00, Dallas, TX 75202  |  |
| Job Type                             | Check         | Location            | Туре           | Check            | Sewer Type            | Check  |
| New                                  | х             | Residential         |                |                  | City Sewer            |  |
| Add-on                               |               | Commercial          |                | X                | County Sewer          |  |
| nbing Contracte                      | (Fire Spri    | nkler Contractor)   | Matt McTyre    |                  | _ Master License #:   | C000773  |
| ibing Contract                       | or:           |                     |                |                  |                       |  |
| ess of Contrac                       | tor: 140 Blu  | iffs Court, Canton, | , GA 30114     |                  | Telephone:            | -4600  |
|                                      |               |                     |                |                  |                       |  |
|                                      |               |                     |                |                  |                       |  |
|                                      | Item          |                     | Quantity       | Ace to the       | Item                  | Quantity   |
| Area Surfac                          | e Drain       |                     |                | Laundry Tu       |                       |  |
| Backflow P                           | reventor      |                     |                | Roof Drain       |                       |  |
| Bar Sink                             |               |                     |                | Sewer            |                       |  |
| Basin                                |               |                     |                | Shower           |                       |  |
| Bidet                                |               |                     |                | Sink             |                       |  |
| Dishwashe                            | •             |                     |                | Slop Sink        |                       |  |
| Disposal                             |               |                     |                | Tub/Bath         |                       |  |
| <b>Drinking Fo</b>                   | untain        |                     |                | Urinals          |                       |  |
| Floor Drain                          |               |                     |                |                  | oncealed Gas Pipe)    |  |
| Fresh Air T                          |               |                     |                | Washing N        |                       |  |
|                                      | ening         |                     |                | Water Clos       |                       |  |
| Furnace Op                           |               |                     |                |                  | ter (200K BTU & Over) | )*   |
| Furnace Op<br>Hub Drain              |               |                     |                | Water Line       |                       | The second secon |
| Furnace Op<br>Hub Drain<br>HVAC Trap |               |                     |                | water Line       | )                     |  |
| Furnace Op<br>Hub Drain              |               |                     |                | water Line       |                       |  |

Permit Fee: & 2,710 Fire marshau Review: \$30. Homm Fee: \$25



Property Owner:

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



Permit # 23-018

Date:

## 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.

Job Location Address:

| Desirat Name  | Tan Harley II              | na almonth is  | ot # 12,13,26     | 17 Zonir       | ng District    | 449                     |  |
|---|----------------------------|--|-------------------|----------------|----------------|-------------------------|--|
| Project Name  | or: (U) to let             | 1 11/1/2 (1)(1)  | 1-11-11-11        | GA Lic #:      |                | 15                      |  |
| Address: WA   | Vinus bridge               | Tive Cari  | follow has        | 50117          | 4 4 00         | - 1                     |  |
| Phone Number  | and x 30 guil              | Cell #: 71/0   | 841 2946          | Fax #:         | 1118 809       | 1421                    |  |
| Width of Lot:   | P10 001-11-4               | Con n. 170   | Heated            | Floor Area:    | Mary Mary      |                         |  |
| Lot Size (sq. ft.)  |                            | 1  |                   | oor Area:      |                |                         |  |
| Front Yard Set-Back Rear Yard Set-Back Rear Yard Set-Back |                            |  |                   |                |                |                         |  |
| Circle One  | Mulit                      |  | wage              | Sep            | tic            |                         |  |
| Exterior Material   |                            | aan I  |                   |                |                |                         |  |
| Estimated Cost to   |                            | 178,400°   | Blus              |                |                |                         |  |
|   |                            |  | r                 |                |                |                         |  |
| Date of Mayor & 0   | Council                    | i i  | LDP# & Dat        | e of           |                |                         |  |
| Approval  |                            |  | Approval          |                |                |                         |  |
|   | OOMMEDOIAL T               | DADEO BUICT DE   | DEDMITTE          | PEEODE         | MODK BEG       | INC                     |  |
|   | COMMERCIAL T               | RADES MUST BE  | PERIVITIE         | Phone:         | WORK DEG       | onto.                   |  |
| Electrical<br>Plumbing                                    |                            |  |                   | Phone:         |                |                         |  |
| HVAC  |                            |  |                   | Phone:         |                | 4                       |  |
| NOTE: All Sub-Contrac                                     | tors Must Be State License | ed And Must Permit Each  | Job Personally. F |                | required.      |                         |  |
| Trade Permits:  |                            |  |                   |                |                | T= -                    |  |
| Trade   | Permit #                   | Date   | Trade             | Pern           | 1it#           | Date                    |  |
| Electric  |                            |  | Other             |                |                |                         |  |
| HVAC  |                            |  | Other             |                |                |                         |  |
| Plumbing  |                            |  | Other             |                |                |                         |  |
| Other   |                            | Addressed a control death of the special section of the section of | Other             |                |                |                         |  |
|   |                            |  |                   |                |                |                         |  |
| THE DEDMIT  | BECOMES NULL AND V         | OID IE WORK OF COMS  | TRUCTION ALITE    | HORIZED IS NO  | COMMENCED      | WITHIN 6 MONTHS, OR     |  |
| IF CONSTRUCTION OF  | R WORK IS SUSPENDED        | OR ABANDONED FOR A   | PERIOD OF 3 M     | ONTHS AT ANY   | TIME AFTER V   | VORK IS STARTED.        |  |
|   | I have read and exar       |  |                   |                |                |                         |  |
| lawe and ordinance  | s governing work per       | ormed under this per   | rmit will be cor  | nplied with wi | nether specifi | ed herein or not. The   |  |
| granting of a Building                                    | ng Permit does not pro     | esume to give authori  | ity to violate or | cancel the pr  | ovisions of a  | ny other state or local |  |
| law regulating const                                      | truction or the perforn    | iance of related requi   | rements           | 00-            |                | 10/d/2017               |  |
| CONTRACTOR/C  | OWNER SIGNATUR             | RE: / MAR  | ///               | Y              | ReviewAtE      | 10/1/2000               |  |
| 0011111111111   |                            | 1  |                   | 0              |                |                         |  |
| DI Assessed   | Fall Pa                    | Downit Appro   | oval              | NO             | OV OBate       | 7                       |  |
| Plan Approval _   | Jan G                      | Permit Appro   | Jvai              | 111            |                | 360                     |  |
| Temporary Pole  | \$                         | Permar   | nent Electric     | for co         | ode compliar   | 100                     |  |
| Water Tap (Based or                                       |                            | Sewer  |                   |                | \$             | E 60 1                  |  |
| Utility Deposit Plan Review (45% of                       | f Permit Fee) \$ 1.        | Permit   |                   | · Additio      |                | をむ<br>n Review          |  |
| Plan Review (45% Of                                       | 0                          |  | un Fee! \$2       |                |                |                         |  |
| TOTAL AMOUNT F  | PAID 3,052                 | 60   |                   | intorn         | nation R       | Required                |  |
|   | ,                          |  | Pl                | ease subm      | nit revision   | s or information        |  |
|   |                            |  |                   |                |                | ommentary               |  |
|   |                            |  |                   |                |                |                         |  |
|   |                            |  | Re                | viewed hv      | Kan            | comments. Date: 10/11/  |  |
|   |                            |  | 110               | VIOVOU DY.     | VIII           |                         |  |





BY: accessors

of Fairburn Building Department 26 West Campbellton Street Fairburn GA. 30213 Permit #<u>23-019</u>

Date: 1/19/23

# Electric, Mechanical and Plumbing Permit Application

| Property Owner:   |
|---|
| Location Address: 92 Howen Ave, FARBULA   |
| Contractor: Aven Communication to thousage , The  |
| Address: 1877 Millians Lige Markett 30044 Email: Kallis. Authoritable. A. Street  |
| Phone#:   |
| 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  |
| <ul> <li>Mechanical Change Out</li> <li>New Mechanical</li> <li>Low Voltage</li> <li>New Electric Circuits</li> <li>Plumbing Repair</li> <li>New Plumbing</li> <li>Water Heater</li> <li>Gas Service</li> <li>New Gas Piping</li> <li>Other</li> </ul>  |
| Detail of Work: FIRE ALARM EXPANSION INTO TENANT OFFICE   |
|   |
|   |
| Estimated Construction Cost 8K Permit Fee 998.00  |
| 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 SUBJECTTO 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: DATE: DATE: DATE: DATE:   |



For Inspections Call 770-964-2244 ext. 401

Permit # 23-026

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     | 142 OAK                    | - St.                           | Subdivision                       | Lot #   |
|------------------|----------------------------|---------------------------------|-----------------------------------|---|
| Dranarty Ow      | ner:s submitted            |                                 | Zoning Classific                  | ation   |
| Type of plan     | s submitted                | 004:10                          | Construction to be sta            | arted no later than (-24-13                                     |
| Describe wo      | uilding Cost: \$           | REROCH HO                       | 1 150                             |   |
| Describe wo      | ik being done              | UE VACIT HE                     | 000                               |   |
| 5.               |                            |                                 |                                   |   |
| Width of Lo      |                            |                                 | Width of Building:                |   |
| Depth of Lo      |                            |                                 | Length of Building:               |   |
| Type of Sev      |                            | Toler Land Ashler               | Total Floor Area:                 |   |
| Material of I    |                            | WOOD COMBINATION                | Heated Floor Area:                | BRICK MASONARY BRICK  |
| Walls- Sidin     | ig (circle)                | WOOD COMBINATION                | SIDING STOCKS STOKE               | BRIOR MACCHART BRIOR  |
|                  |                            |                                 | Ta                                |   |
| Front Yard       |                            |                                 | Side Yard Set-Back                | 1   |
| Back Yard S      | бет-васк                   |                                 | Side Yard Set-Back                |   |
|                  |                            |                                 | 2                                 |   |
| General Co       | ntractor: Zeb              | under CAMM                      | GA Lic #                          | <b>#</b> :  |
| Address: 1'      | 70 Sibson                  | enbe C.Amm                      | N GA 3026                         | 7   |
| Phone Num        | ber 678-5                  | 90-7756                         | _ Cell #:                         |   |
|                  |                            |                                 |                                   |   |
| Subcontrac       | tors:                      |                                 |                                   |   |
| Electrical       |                            |                                 | Phone:                            |   |
| Plumbing<br>HVAC |                            |                                 | Phone:                            |   |
|                  | I<br>Contractors Must Be S | tate Licensed And Must Permit E | Each Job Personally. We Require F | Proof they are licensed.  |
|                  |                            |                                 |                                   |   |
|                  |                            |                                 |                                   | QUIRES FORMAL AMENDMENT O<br>JLT IN STOP-WORK ORDER, FIN        |
|                  |                            |                                 |                                   | BATIONARY PERIOD PRIOR TO                                       |
| APPROVAL OF      | SUBSEQUENT PE              | ERMITS FOR BOTH THE CO          | INTRACTOR AND UNAUTHOR            | RIZED SUB-CONTRACTOR.   |
|                  |                            |                                 |                                   | ITHORIZED IS NOT COMMENCE<br>FOR A PERIOD OF 3 MONTHS A         |
|                  | ER WORK IS STAF            |                                 | OU ENDED ON NOTHED ONED           | TORNY ENGLISHED OF CHICKING A                                   |
|                  |                            |                                 |                                   |   |
|                  |                            |                                 |                                   | ame to be true and correct. A<br>t will be complied with whethe |
|                  |                            |                                 |                                   | to give authority to violate of                                 |
|                  |                            |                                 |                                   | or the performance of relate                                    |
| requirements     |                            |                                 | 1                                 |   |
| CONTRACT         | OR/OWNER SIG               | CNATURE Q. I. CA                | 604 (1000-10                      | DATE 1-24-23  |
| CONTRACT         | OR/OWNER SIG               | SINATURE:                       | Les Common                        | DATE  |
| Plan Approva     | al                         | V Permit App                    | proval                            | Date  |
| TOTAL PERM       | AITEEE: # I                | 75-191                          | +                                 | 2   |
| IOIALILLINI      | ··· ·                      | 1000                            |                                   |   |



Permit # 23-021

Date: 1/26/23

## 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 1120 RIVER                                    | rown Rd  | Subdivision                    | Lot #  |
|--|--|--------------------------------|--|
| Property Owner: Estate                                     | if Niken Ratylate  | Zoning Classific               | ation  |
| Type of plans submitted                                    |  | Construction to be sta         | arted no later than                                      |
| Estimated Building Cost: \$ 2                              | 3000   |                                |  |
| Describe work being done: §                                | Reliating  |                                |  |
| 3  | J  |                                |  |
|  |  |                                | 1  |
| Width of Lot:  |  | Width of Building:             |  |
| Depth of Lot:  |  | Length of Building:            |  |
| Type of Sewage:  |  | Total Floor Area:              |  |
| Material of Roof:  |  | Heated Floor Area:             | BRICK MASONARY BRICK                                     |
| Walls- Siding (circle)                                     | MOOD COMBINATION SI  | DING STUCCO STONE              | BRICK WASONART BRICK                                     |
|  |  |                                |  |
| Front Yard Set-Back  |  | Side Yard Set-Back             |  |
| Back Yard Set-Back   |  | Side Yard Set-Back             |  |
|  |  |                                |  |
|  |  |                                |  |
| General Contractor: MAR<br>Address: 1120 Pavente           | GARET BAKER  | GA Lic #                       | <b>#</b> :   |
| Address: 7120 Paverte                                      | own ed   |                                |  |
| Phone Number 404-52  | 0-3536   | Cell #: 404-520 -              | 3534   |
|  |  |                                |  |
| Subcontractors:  |  |                                |  |
| Electrical   |  | Phone:                         |  |
| Plumbing   |  | Phone:                         |  |
| HVAC   |  | Phone:                         | A 4.   |
| NOTE: All Sub-Contractors Must Be St                       | tate Licensed And Must Permit Eac  | h Job Personally. We Require P | roof they are licensed.                                  |
|  | THE RESERVE TO THE PROPERTY OF | ALLANTII TIUO DEDMIT DEG       | NUIDEO EODMAL AMENDMENT O                                |
| USE OF SUBS OTHER T  | HAN LISTED IN CONJUNCTIC   | N WITH THIS PERMIT REG         | QUIRES FORMAL AMENDMENT O<br>JLT IN STOP-WORK ORDER, FIN |
| AND/OR OTHER MEASURES. I                                   | NCLUDING REVOCATION C  | F PERMIT AND/OR PRO            | BATIONARY PERIOD PRIOR TO                                |
| APPROVAL OF SUBSEQUENT PE                                  | RMITS FOR BOTH THE CONT  | FRACTOR AND UNAUTHOR           | RIZED SUB-CONTRACTOR.                                    |
| THIS PERMIT BECOMES  | S NULL AND VOID IF WORK  | OR CONSTRUCTION AU             | THORIZED IS NOT COMMENCE                                 |
| MITHIN 6 MONTHS, OR IF CONS<br>ANY TIME AFTER WORK IS STAF |  | PENDED OK ABANDONED            | FOR A PERIOD OF 3 MONTHS A                               |
| ANT TIME AT TEX WORK TO STATE                              | CLED.  |                                |  |
| I hereby certify that I have rea                           | ad and examined this appl  | ication and know the sa        | ame to be true and correct. A                            |
| provisions of laws and ordina                              | inces governing work perf  | ormed under this permit        | t will be complied with whether                          |
| specified herein or not. The                               | granting of a Building Pe  | ermit does not presume         | to give authority to violate of                          |
| cancel the provisions of any                               | other state or local law   | regulating construction        | or the performance of relate                             |
| requirements.  |  |                                |  |
|  |  | 20()                           | 1/26/22  |
| CONTRACTOR/OWNER SIG                                       | SNATURE: 1 May   | my 2                           | DATE 1/26/23   |
| Dien Annyoyal  | Permit Appro   | val                            | Date   |
| Plan Approval  | remit Appro  |                                | Date   |
| TOTAL PERMIT FEE:  | 15.00  |                                |  |

For Inspections Call 770-964-2244 ext. 401



For Inspections Call 770-964-2244 ext. 401

Permit # 23-022

Date: 01/25/2023

## 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 6053 Preserve                                  |  | _Subdivision                            | Lot #   |  |
|---|--|---|---|--|
| Property Owner: ATTURE Fire                                 |  | Zoning Classification                   |   |  |
| Type of plans submitted Construction to be started no later |  |   | arted no later than                                 |  |
| Estimated Building Cost: \$ 17                              |  |   |   |  |
| Describe work being done: _                                 | Re-Roof  |   |   |  |
|   |  |   |   |  |
| Width of Lot:   |  | Width of Building:                      |   |  |
| Depth of Lot:   |  | Length of Building:                     |   |  |
| Type of Sewage:   |  | Total Floor Area:                       |   |  |
|   | - 3 tabs Shingles Charcoal                         | 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                      |   |  |
| Buok Tura Cot Buok  |  | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | ,   |  |
|   |  |   |   |  |
| General Contractor: Revo                                    | Construction                                       | GA Lic 7                                | #: <u>GCQA008000</u>                                |  |
| Address: 2470 Windy Hill Ro                                 |  | GA 30060                                |   |  |
| Phone Number  |  |   |   |  |
|   |  |   |   |  |
| Subcontractors:   |  |   |   |  |
| Electrical  |  | Phone:                                  |   |  |
| Plumbing  |  | Phone:                                  |   |  |
| HVAC  |  | Phone:                                  |   |  |
| NOTE: All Sub-Contractors Must Be S                         | tate Licensed And Must Permit Ea                   | ach Job Personally. We Require I        | Proof they are licensed.                            |  |
| USE OF SUBS OTHER T   | HAN LISTED IN CONJUNCT                             | ION WITH THIS PERMIT RE                 | QUIRES FORMAL AMENDMENT OF                          |  |
| THE PERMIT AND PRIOR APPRO                                  | OVAL OF THE CITY. FAILU                            | RE TO SECURE MAY RESU                   | JLT IN STOP-WORK ORDER, FINE                        |  |
| AND/OR OTHER MEASURES, I                                    | RMITS FOR BOTH THE CO                              | NTRACTOR AND UNAUTHO                    | DBATIONARY PERIOD PRIOR TO<br>RIZED SUB-CONTRACTOR. |  |
| THIS PERMIT BECOMES   | S NULL AND VOID IF WOR                             | RK OR CONSTRUCTION AL                   | JTHORIZED IS NOT COMMENCE!                          |  |
|   |  | SPENDED OR ABANDONED                    | FOR A PERIOD OF 3 MONTHS A                          |  |
| ANY TIME AFTER WORK IS STAF                                 | RIED.  |   |   |  |
| I haraby cartify that I have re-                            | ad and examined this an                            | nlication and know the s                | ame to be true and correct. A                       |  |
| provisions of laws and ordina                               | an and examined this ap<br>inces governing work ne | rformed under this permi                | t will be complied with whethe                      |  |
| specified herein or not. The                                | granting of a Building F                           | Permit does not presume                 | e to give authority to violate o                    |  |
| cancel the provisions of any                                | other state or local law                           | regulating construction                 | or the performance of related                       |  |
| requirements.   | 1)1  | $\Delta$ $\Lambda$                      |   |  |
|   | / / /  | A)Amos)                                 | DATE 01/25/2023                                     |  |
| CONTRACTOR/OWNER SIG  | GNATURE: V   | WHY V                                   | DATE  |  |
| Dian Approval   | Permit App   | roval                                   | Date  |  |
| Plan Approval   | 18 CIV   |   |   |  |
| TOTAL PERMIT FEE:   | /S·U()   |   |   |  |



Permit # 23-023

## **HVAC PERMIT APPLICATION**

| Property Owner:Rodgi Belfond  John D Carden / Cool Air Mecha HVAC Contractor:1950 Guffin Lane  Heating Units # of Units 1 Name Lennox  | Master License #                              | CN208278<br>770-266-5247   |  |
|--|---|--|--|
| John D Carden / Cool Air Mecha HVAC Contractor: 1950 Guffin Lane  Heating Units # of Units 1 Name Lennox   | Master License # Telephone #: Refrig/AC Units |  |  |
| Address of Contractor: 1950 Guffin Lane  Heating Units # of Units 1  Name Lennox   | Master License # Telephone #: Refrig/AC Units |  |  |
| Heating Units # of Units 1 Name Lennox   | Refrig/AC Units                               | 770-266-5247   |  |
| # of Units 1<br>Name Lennox  |   |  |  |
| # of Units 1<br>Name Lennox  |   |  |  |
| Name Lennox  | # of Units                                    |  |  |
|  |   | 1  |  |
|  | Name  | Lennox   |  |
| Model # EL16XP1-024-230  | Model #                                       | CBA27UHE-024   |  |
| BTU  | Tons  | 2  |  |
| Heat Loss  | Heat Gain                                     |  |  |
| CFM  | CFM   |  |  |
| enera y por la principa e a mentra de la calegación de entre de mentra de la calegación de la calegación de la<br>La mentra de la final de la Mandalagación de calegación de entre describitor de la Calegación de la calegación |   |  |  |
| Fans   | Grease Hoods                                  |  |  |
| # of Units   | # of Units                                    |  |  |
| H.P.   | Sq. Feet                                      |  |  |
| CFM  | Size of Vent                                  |  |  |
|  | CFM Required                                  | e special control of the first of the confiction |  |
| Gas Pipe   | Gas Range                                     |  |  |
| 550 7 45   | Outlets                                       |  |  |
| # of Units   | # of Outlets                                  |  |  |
| Total BTU of Pipe:   |   |  |  |
| otal B10 of 1 ipc.   |   |  |  |

permits subject to increased fees.



# Electric, Mechanical and Plumbing

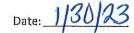
| Permit Application  |
|---|
| Property Owner: Enterprise Holding  |
| Location Address: 450 Serioia Road  |
| Contractor: Systems Engineering Group LLC   |
| Address: 1706 Red Bud NE Calhoun 3070/ Email: Vicki @ Segroup Ilc. com  |
| Address: 1706 Red Bud NE Calhoun 3070 Email: Vicki @ Segroup Ilc. com  Street City, ZIP  Phone#: 706-629-6987 License#: LVU 406659  |
|   |
| <u>Information on Project:</u> (✓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   |
| <ul> <li>☐ Mechanical Change Out</li> <li>☐ New Mechanical</li> <li>☐ Low Voltage</li> <li>☐ New Electric Circuits</li> <li>☐ Plumbing Repair</li> <li>☐ New Plumbing</li> <li>☐ Water Heater</li> <li>☐ Gas Service</li> <li>☐ New Gas Piping</li> <li>☐ Other</li> </ul>  |
| Detail of Work: 25 DATA Drops   |
| ·   |
|   |
|   |
| Estimated Construction Cost \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\  |
| 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 SUBJECTTO 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

DATE: 1-24-23

City of Fairburn Building Department 26 West Campbellton Street Fairburn GA. 30213 Permit # 23-025





# Electric, Mechanical and Plumbing Permit Application

| Property Owner:  | TMOBILE # 8028  | ९०३६  |  |  |  |
|--|---|---|--|--|--|
| ocation Address:   | 8028 SENDIA ROLD  | ST 300  |  |  |  |
|  |   |   |  |  |  |
| Contractor: CENTRAL FINE PROTECTION, INC  Address: 1760 OLD COVINGTON TO. NE 30013 Email: DESIGN ECENTRALFINE. NET  Street City, ZIP  License#: CL 200041 - GTATE  CL 21 - 07999 - ROCKDALE  |   |   |  |  |  |
| Street Phone#: 770 9   | 22 4250 City,   | , ZIP<br>License#: Ca   | L 000041 - LITATE  |  |  |
|  |   |   | 121-07999-ROCKDALL   |  |  |
|  | <u>Information on Pr</u>  | <u>roject:</u> (✔All That Apply)  |  |  |  |
|  | Commercial [  | ☐ Residential (1 or 2-Family  | Dwelling)  |  |  |
| <u>System Modific</u><br>☐ Electrical  | <u>cations</u>  | <b>Plumbing</b>   | □ Water/Sewer  |  |  |
|  | rice  | □Upgrade Service<br>o   |  |  |  |
| <ul> <li>☐ Mechanical Change Out</li> <li>☐ New Mechanical</li> <li>☐ Low Voltage</li> <li>☐ New Electric Circuits</li> <li>☐ Plumbing Repair</li> <li>☐ New Plumbing</li> <li>☐ Water Heater</li> <li>☐ Gas Service</li> <li>☐ New Gas Piping</li> <li>☑ Other</li> </ul> |   |   |  |  |  |
| Detail of Work: ADD/ NELOCATE FINE SPANKLEAS   |   |   |  |  |  |
| -  | ,   |   |  |  |  |
|  |   |   |  |  |  |
|  |   |   |  |  |  |
| Estimated Constru  | uction Cost 4,000<br>r: \$100 Fine markle   | Permit Fo   | # 155.0x)  |  |  |
| I HEREBY CERTIFY THAT I H ELECTRIC, MECHANICAL OF STATE OR LOCAL LAW REGG FEES. THIS PERMIT BECOI OR ABANDONED FOR A PEF  CONTRACTOR SIGN  | HAVE READ AND EXAMINED THIS APPLICATION R PLUMBING PERMIT DOES NOT PRESUME TO  ULATING CONSTRUCTION OR THE PERFOMA  MES NULL AND POID IF WORK AUTHORIZ  RIOD OF 6 MONTHS AT ANY TIME AFTER WO | ON AND KNOW THE SAME TO BE TRU TO GIVE AUTHORITY TO VIOLATE OR NICE OF RELATED REQUIREMENTS. L ZED IS NOT COMMENCED WITHIN 6 DRK IS STARTED.  DAT | IE AND CORRECT. THE GRANTING OF AN<br>CANCEL THE PROVISIONS OF ANY OTHER<br>ATE PERMITS ARE SUBJECT TO INCREASED |  |  |





# 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 948 FELLOWS HIP RD.   |                       | Subdivision TROTTER FARM ESTATE Lot # 29                       |                             |  |  |
|--|-----------------------|--|-----------------------------|--|--|
| Property Owner:  |                       | Zoning Classification Construction to be started no later than |                             |  |  |
| Type of plans submitted FEXICE   |                       | Construction to be sta   | rted no later than          |  |  |
| Estimated Building Cost: \$  |                       |  |                             |  |  |
| Describe work being done:  |                       |  |                             |  |  |
|  |                       |  |                             |  |  |
|  | 1.0                   | 11-1-1-4-65  | 777/6 6 5                   |  |  |
| Width of Lot:  | 102                   | Height of Fence:   | 72"-64                      |  |  |
| Depth of Lot:  | 213.60                |  |                             |  |  |
| Material of Fence:   | NOOD                  |  |                             |  |  |
|  |                       |  |                             |  |  |
|  |                       |  |                             |  |  |
| Congred Contractor: KA   | war FORM              | Pue Lie #  | 4.                          |  |  |
| General Contractor: _k/. Address: _748 Feccour   | La LEID RA            | Dus Lic #  |                             |  |  |
| Phone Number   | SIFIF (ND             | Cell #: (2) 846-160  | 111                         |  |  |
| Friorie Number   |                       | Cell #. ( 20 16-762  | 9                           |  |  |
|  |                       |  |                             |  |  |
| THIS PERMIT BECOMES  | NULL AND VOID IF WOR  | K OR CONSTRUCTION AUT  | HORIZED IS NOT COMMENCED    |  |  |
| WITHIN 6 MONTHS, OR IF CONST   |                       | SPENDED OR ABANDONED I   | FOR A PERIOD OF 3 MONTHS AT |  |  |
| ANY TIME AFTER WORK IS STAR  | IED.                  |  |                             |  |  |
| An accurate up-to-date s   | survey of property s  | howing the proposed  | fence location must be      |  |  |
| submitted with this applie   |                       |  |                             |  |  |
|  |                       |  |                             |  |  |
| Has Home Owner's Association approval been obtained? YesNo 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 regulati  | ng construction or th | e performance of rela  | ited requirements.          |  |  |
|  | 21/1                  |  |                             |  |  |
| CONTRACTOR/OWNER SIG   | SNATURE:              | - X  | DATE                        |  |  |
| T A  | wa 22 P               | Z1'  | 1/20/22                     |  |  |
| Plan Approval  | Permit Appr           | oval   | Date 1/30/23                |  |  |
| TOTAL PERMIT FEE: \$100.00   |                       |  |                             |  |  |
|  |                       |  |                             |  |  |
| *If not approved, reason for denial:   |                       |  |                             |  |  |

Permit # 23-027

Date: 1/3/123

# Electric, Mechanical and Plumbing Permit Application

| roperty Ov   | wner:   | Michael Mills   |  |  |   |  |
|--|---|---|--|--|---|--|
| .ocation Ad  |   | 610 Birkdale Driv   | ve, Fairburn, GA   |  |   |  |
| Contractor:  |   | Philip Maguire  |  |  |   |  |
| Address:   | 610 E   | Birkdale Drive, Fairbu  |  |  |   | theprocompanies.com  |
| Phone#:  |   | 08085238  |  |  | EN218028  |  |
|  |   | <u>Inform</u>   | nation on Proje  | <u>ect:</u> ( <b>√</b> All That Ap                           | ply)  |  |
|  |   | ☐ Commerc   | cial X□ F  | Residential (1 or 2-Fa                                       | mily Dwelling)  |  |
|  | m Modific<br>ectrical   |   | anical   | ☐ Plumbing   | □ Wat   | er/Sewer   |
|  |   | ce 🗆 New  |  | □Upgrade Servi<br>Georgia Power                              |   |  |
| □ Me<br>□ Plu<br>□ Ot  | umbing Re   | :hange Out □ Ne<br>pair □ New Plum  | ew Mechanical<br>nbing □ Wat   | □ Low Voltage  <br>er Heater □ Gas S                         | □ New Electri<br>Service □ N  | c Circuits<br>ew Gas Piping  |
| Detail of V  | Work: In  | stall solar panels on   | existing roof and  | d solar wiring.  |   |  |
| <u> </u>   |   |   |  |  |   |  |
|  |   |   |  |  |   |  |
|  |   |   |  | Perm   |   | 645.00   |
| I HEREBY CER' ELECTRIC, ME STATE OR LOC FEES. THIS P OR ABANDON  CONTRAC | RTIFY THAT I H ECHANICAL OF CAL LAW REGU PERMIT BECOI NED FOR A PEF CTOR SIGN | AVE READ AND EXAMINED  PLUMBING PERMIT DOES  JLATING CONSTRUCTION O  MES NULL AND VOID IF V  RIOD OF 6 MONTHS AT AN | OTHIS APPLICATION A<br>S NOT PRESUME TO G<br>OR THE PERFOMANCE<br>WORK AUTHORIZED<br>TIME AFTER WORK | E OF RELATED REQUIREMEN<br>IS NOT COMMENCED WITH<br>STARTED. | E TRUE AND CORRECTE OR CANCEL THE F<br>TE OR CANCEL THE F<br>TS. LATE PERMITS A | CT. THE GRANTING OF AN PROVISIONS OF ANY OTHER ARE SUBJECT TO INCREASED IF WORK IS SUSPENDED |







Permit # 23-028

Date: 1/3/123

## **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 6063 Trotters create taik burn ausubdivision Cobblestone Clen Lot # 51  Property Owner Den to May Subdivision Cobblestone Clen Lot # 51  Type of plans submitted Construction to be started no later than Fence exists  Estimated Building Cost: \$ 1000.00  Describe work being done: Moved Fence Inward towards my property   |      |                  |  |  |  |
|--|------|------------------|--|--|--|
| Width of Lot:  |      | Height of Fence: |  |  |  |
| Depth of Lot:  | ( )  | 6 F+             |  |  |  |
| Material of Fence:   | Mood |                  |  |  |  |
|  |      |                  |  |  |  |
| General Contractor: DENTA MAUS Bus Lic #:  Address: 6063 Teoffces Cieale Falkwan GA  Phone Number Cell #: 678 490 4971   |      |                  |  |  |  |
| 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? YesNo $N/A_{-}$ 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: Detuta Mays DATE 1-25-23  Plan Approval Permit Approval Date 1/30/23  TOTAL PERMIT FEE: \$100.00   |      |                  |  |  |  |
| *If not approved, reason for denial:   |      |                  |  |  |  |