



# City of Alpharetta

# Commercial Building Applications and Forms

## NOTICE

The information within this document is prepared by the City of Alpharetta Georgia Community Development Department, Inspections and Codes Enforcement Division, hereinafter referred to as "the City." The intent of this document is to reasonably inform our citizens, designers, developers, contractors, and the general public of the codes and laws related to commercial building construction in effect within the city and also to communicate the policies and procedures developed by the city over time to enforce these laws for safe and code compliant commercial construction.

This document is a building official interpreted "plain language" compilation of various sections of federal, state, county, and city building construction laws and the rules and regulations related to improving commercial property in the City. The information within is not all inclusive, nor is it designed to be, but rather presents a general overview of construction laws and processes relative to planning, permitting, constructing, inspecting, and completing a commercial construction project in the city.

For the purpose of this document, the following shall apply to the use of words and phrases: Words used in present tense include future tense. Words used in singular tense include plural tense. The word "he" also means "she." The words "shall" or "must" are always mandatory. The words "may" or "can" are permissive. The word "and" indicates all conditions, requirements, or factors so connected must be met or fulfilled, whereas the word "or" indicates that at least one condition, requirement, or factor so connected must be met. The word "structure" means anything that is built and includes the word "building." The word "person" means any individual, corporation, association, firm, partnership or other legal entity. The word "permit" means written governmental permission issued by an authorized official, empowering the holder thereof to do some act not forbidden by law, but not allowed without such authorization.

This document may be updated as codes, laws, rules, regulations, and policies change. This document has been prepared by the City of Alpharetta Building Official, and specific requirements and policies not mandated by law may be modified or waived by the Building Official. This and other construction related procedures may be accessed and downloaded at:

[www.alpharetta.ga.us](http://www.alpharetta.ga.us).

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# City of Alpharetta

## INTERIOR FINISH (ONLY) COMMERCIAL BUILDING PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

**All Applicable Blanks Must Be Filled In – No P.O. Box Addresses – Please Print Legibly**

Application Date: \_\_\_\_\_ Applicant Is:  Owner/Agent  Contractor/Agent

### PROPERTY INFORMATION

PROJECT Street Address: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration No: \_\_\_\_\_ Issued In: \_\_\_\_\_ Expires: \_\_\_\_\_

Contractor License No: \_\_\_\_\_ Qualifying Agent: \_\_\_\_\_ Qualify Agent No. \_\_\_\_\_

### WORK INFORMATION

PROJECT Name: \_\_\_\_\_

Briefly Describe Work: \_\_\_\_\_

Bldg. Height: \_\_\_\_\_ No. Stories: \_\_\_\_\_ Fire Sprinkled:  Yes  No Max Live Load/FL \_\_\_\_\_ psf.

Foundation is:  Slab-on-grade  Basement  Crawlspace  Other:

Associated Work?

Electrical  Grease Trap  Low Voltage  Mechanical  Plumbing

Primary Use Group: \_\_\_\_\_ Use: \_\_\_\_\_

Type of Construction:  1A  1B  2A  2B  3A  3B  4  5A  5B

First Generation Interior Finish Square Footage: \_\_\_\_\_

Second Generation Interior Finish Square Footage: \_\_\_\_\_

Second Generation Interior Finish Construction Cost: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Applicant Printed Name:** \_\_\_\_\_



# City of Alpharetta

## NEW COMMERCIAL BUILDING PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY

Application Date: \_\_\_\_\_ Applicant is:  Owner/Agent  Contractor/Agent

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

Work is:  NEW BUILDING  ADDITION

City LDP No: \_\_\_\_\_ Sewer Permit No: \_\_\_\_\_ City Impact Receipt: \_\_\_\_\_

**PROPERTY OWNER:** \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_ Expires: \_\_\_\_\_

Contractor License #: \_\_\_\_\_ State: \_\_\_\_\_

Qualifying Agent: \_\_\_\_\_ Qualifying Agent #: \_\_\_\_\_

### WORK INFORMATION

Briefly Describe Work: \_\_\_\_\_

Work Area Height: \_\_\_\_ # Stories: \_\_\_\_\_ Fire Sprinkled:  Yes  No Max Live Load/FL \_\_\_\_\_ psf.

Type of Construction:  1A  1B  2A  2B  3A  3B  4  5A  5B

Primary Use Group \_\_\_\_\_ Use: \_\_\_\_\_ Sq Foot: \_\_\_\_\_

Foundation is:  Slab-on-grade  Basement  Crawlspace  Engineered Floor Framing  
 Engineered Roof/Ceiling Framing  Conventional Framing  Other: \_\_\_\_\_

Associated Work?  Electrical  Low Voltage  Mechanical  Plumbing  Grease Trap

Applicant Signature: \_\_\_\_\_ Applicant Printed Name: \_\_\_\_\_

Applicant Email: \_\_\_\_\_ Phone: \_\_\_\_\_



City of Alpharetta
BUILDING VALUATION LETTER

ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY

PROPERTY INFORMATION

Project Street Address: Suite:

PROJECT IS: [ ] COMMERCIAL [ ] RESIDENTIAL

Subdivision? [ ] NO [ ] YES – Subdivision Name:

ESTIMATED VALUE (INCLUDES LABOR AND MATERIALS):

SQUARE FOOTAGE:

PROPERTY OWNER:

Name: Phone:

Street Address: Suite:

City: State: Zip:

Email:

Description of Work:

Three horizontal lines for describing the work.

Property owner signature must be signed before a notary public.

I, the undersigned, declare that, to the best of my knowledge and belief, the information herein is true and correct.

SIGNATURE OF PROPERTY OWNER OR AGENT FOR THE PROPERTY OWNER:

Signature: Date:

Notary Public Information:

Subscribed and sworn to before me this day of , 20

Signature of Notary Public: (seal)

Phone:

My commission expires: , 20



# City of Alpharetta

## DEMOLITION PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY

Application Date: \_\_\_\_\_ Applicant is:  Owner/Agent  Contractor/Agent

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

**PROPERTY OWNER:** \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_ Expires: \_\_\_\_\_

Contractor License #: \_\_\_\_\_ State: \_\_\_\_\_

Qualifying Agent: \_\_\_\_\_ Qualifying Agent #: \_\_\_\_\_

### WORK INFORMATION

Briefly Describe Work: \_\_\_\_\_

Associated Work:

Electrical  Low Voltage  Mechanical  Plumbing

Type of Construction:  1A  1B  2A  2B  3A  3B  4  5A  5B

Primary Use Group: \_\_\_\_\_ Use: \_\_\_\_\_

**Whole Building Demolition Fee = \$300.00**

**Partial Building or Structure Demolition Fee = \$200.00**

Applicant Signature: \_\_\_\_\_ Applicant Printed Name: \_\_\_\_\_

Applicant Email: \_\_\_\_\_ Phone: \_\_\_\_\_



# City of Alpharetta

## FOUNDATION ONLY PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

All Applicable Blanks Must Be Filled In – No P.O. Box Addresses – Please Print Legibly

Application Date: \_\_\_\_\_ Applicant Is:  Owner/Agent  Contractor/Agent

City LDP No: \_\_\_\_\_ Sewer Permit No: \_\_\_\_\_ City Impact Receipt: \_\_\_\_\_

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

Front Setback: \_\_\_\_\_ Left Side Setback: \_\_\_\_\_ Right Side Setback: \_\_\_\_\_ Rear Setback: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_ Expires: \_\_\_\_\_

Contractor License #: \_\_\_\_\_ State: \_\_\_\_\_

Qualifying Agent: \_\_\_\_\_ Qualifying Agent #: \_\_\_\_\_

### WORK INFORMATION

PROJECT Name: \_\_\_\_\_

Briefly Describe Work: \_\_\_\_\_

Bldg. Height: \_\_\_\_\_ No. Stories: \_\_\_\_\_ Fire Sprinkled:  Yes  No Max Live Load/FL \_\_\_\_\_ psf.

Foundation is:  Slab-on-grade  Basement  Crawlspace  Other:

Associated Work?  Electrical  Grease Trap  Low Voltage  Mechanical  Plumbing

Primary Use Group \_\_\_\_\_ Use: \_\_\_\_\_ Sq Foot: \_\_\_\_\_

Type of Construction:  1A  1B  2A  2B  3A  3B  4  5A  5B

Applicant Signature: \_\_\_\_\_ Applicant Printed Name: \_\_\_\_\_

Applicant Email: \_\_\_\_\_ Phone: \_\_\_\_\_



City of Alpharetta  
AUTHORIZED PERMIT AGENT FORM

License verification by permitting office will be completed by visiting: <https://sos.ga.gov/index.php/licensing>

Licensed Contractor:  Individual  Qualifying Agent

Name of licensed person: \_\_\_\_\_

\*Please attach a copy of Individual license or Company License  
(Reflecting the company and qualifying agent license number)

License number of individual or qualifying agent: \_\_\_\_\_

Name of licensed company (if applicable): \_\_\_\_\_

License number of company (if applicable): \_\_\_\_\_

**AUTHORIZATION STATEMENT:**

I, \_\_\_\_\_, hereby designate  
*Name of Licensed Individual or Qualifying Agent*

\_\_\_\_\_  
*Name of person picking up permit*

to apply for and obtain the permit(s) for the project located at

\_\_\_\_\_  
*Project Street Address, City, State, Zip*

Copy  
Driver's License of  
Person Picking Up

I, the undersigned, being the contractor as either an individual or a qualifying agent, do hereby affirm and Swear, under oath, that all information on this form and on accompanying documents are true and correct.

Signature of individual or qualifying agent: \_\_\_\_\_ Date: \_\_\_\_\_

**Notary Public Information:**

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

Signature of Notary Public: \_\_\_\_\_ (Seal)

State of \_\_\_\_\_ County of \_\_\_\_\_

My commission expires: \_\_\_\_\_, 20\_\_\_\_



# City of Alpharetta RESUBMITTAL / REVISION FORM

ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY

DATE: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

**PROPERTY INFORMATION**

Project Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

Project type:     COMMERCIAL     RESIDENTIAL

Subdivision?     NO     YES – Subdivision Name: \_\_\_\_\_

**APPLICANT INFORMATION:**

Name: \_\_\_\_\_

Applicant phone: \_\_\_\_\_

Applicant email: \_\_\_\_\_

**Description of Change:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Revisions Reviewed by Plans Examiner: \_\_\_\_\_

Signature of Plan Examiner: \_\_\_\_\_



# City of Alpharetta

## SHELL BUILDING PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

All Applicable Blanks Must Be Filled In – No P.O. Box Addresses – Please Print Legibly

Application Date: \_\_\_\_\_ Applicant Is:  Owner/Agent  Contractor/Agent  
City LDP No: \_\_\_\_\_ Sewer Permit No: \_\_\_\_\_ City Impact Receipt: \_\_\_\_\_

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

Front Setback: \_\_\_\_\_ Left Side Setback: \_\_\_\_\_ Right Side Setback: \_\_\_\_\_ Rear Setback: \_\_\_\_\_

**PROPERTY OWNER:** \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_ Expires: \_\_\_\_\_

Contractor License #: \_\_\_\_\_ State: \_\_\_\_\_

Qualifying Agent: \_\_\_\_\_ Qualifying Agent #: \_\_\_\_\_

### WORK INFORMATION

Project Name: \_\_\_\_\_

Briefly Describe Work: \_\_\_\_\_

Bldg. Height: \_\_\_\_\_ No. Stories: \_\_\_\_\_ Fire Sprinkled:  Yes  No Max Live Load/FL \_\_\_\_\_ psf.

Foundation is:  Slab-on-grade  Basement  Crawlspace  Other:

Associated Work?  Electrical  Grease Trap  Low Voltage  Mechanical  Plumbing

Primary Use Group \_\_\_\_\_ Use: \_\_\_\_\_ Sq Foot: \_\_\_\_\_

Type of Construction:  1A  1B  2A  2B  3A  3B  4  5A  5B

Applicant Signature: \_\_\_\_\_ Applicant Printed Name: \_\_\_\_\_

Applicant Email: \_\_\_\_\_ Phone: \_\_\_\_\_



# City of Alpharetta

## SITE WALL PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY

Application Date: \_\_\_\_\_ Applicant is:  Owner/Agent  Contractor/Agent

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

**PROPERTY OWNER:** \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_ Expires: \_\_\_\_\_

Contractor License #: \_\_\_\_\_ State: \_\_\_\_\_

Qualifying Agent: \_\_\_\_\_ Qualifying Agent #: \_\_\_\_\_

### WORK INFORMATION

Briefly Describe Work: \_\_\_\_\_

Front Setback: \_\_\_\_\_ Left Side Setback: \_\_\_\_\_ Right Side Setback: \_\_\_\_\_ Rear Setback: \_\_\_\_\_

Primary Use Group: \_\_\_\_\_ Use: \_\_\_\_\_

Construction Valuation for Calculating Permit Fees: \_\_\_\_\_

*Note: Block and Wood wall construction, where using dead-man, geo-grid, or similar stabilization methods, are subject to IBC Chapter 17-Special Inspections provisions. Submit Inspector Credentials for Building Official review at plan review submission.*

Applicant Signature: \_\_\_\_\_ Applicant Printed Name: \_\_\_\_\_

Applicant Email: \_\_\_\_\_ Phone: \_\_\_\_\_



# City of Alpharetta

## GREASE TRAP PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY

Application Date: \_\_\_\_\_ Applicant is:  Owner/Agent  Contractor/Agent

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_ Expires: \_\_\_\_\_

Contractor License #: \_\_\_\_\_ Class: \_\_\_\_\_

Card Holder Name: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION

Project Name: \_\_\_\_\_

Project Type:  Restaurant  Sandwich Shop/Bakery/Grocery  Convenience Store  Other

Grease Trap Location:  Above Grade  Below Grade Number of Grease Traps: \_\_\_\_\_

Size of Grease Traps: (gal/#) \_\_\_\_\_

- If grease traps are for a future tenant in a shell building, provide LDP number: \_\_\_\_\_
- Fees are \$25.00 per grease trap installed.

Applicant Printed Name: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

Applicant Email: \_\_\_\_\_ Phone: \_\_\_\_\_

# City of Alpharetta



## ELECTRICAL PERMIT APPLICATION FORM

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to install and use an electrical service system for a building or structure as described herein and shown on the City approved plans and specifications and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

**ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY**

### GENERAL INFORMATION

Project Name / Subdivision: \_\_\_\_\_ Building Permit #: \_\_\_\_\_

### PROPERTY INFORMATION

Work Site Street Address: \_\_\_\_\_ Lot/Suite: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Contact #: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### SUBCONTRACTOR INFORMATION

Company: \_\_\_\_\_ Contact #: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_

Card Holder: \_\_\_\_\_ GA Card #: \_\_\_\_\_ Class: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION & FEES - Minimum Permit Fee = \$50.00

<i>RESIDENTIAL</i>				<i>COMMERCIAL</i>			
ITEM	NO	FEES	TOTAL	ITEM	NO.	FEE	TOTAL
<sup>1</sup> Townhouse-Whole House Electrical		\$100.00		<sup>1</sup> Apartment/Condo Whole House Electrical		\$100.00	
Temporary Power Pole		\$50.00		Temporary Power Pole		\$50.00	
<sup>1</sup> Whole House Electrical 0-200A Service Panel		\$100.00		0-400A Service System		\$75.00	
0-200A Additional Panel		\$40.00 ea		401-1000A Service System		\$100.00	
Service Change Out 0-200A Service Panel		\$50.00 ea		1001A+Service System		\$125.00	
Wall Outlet		\$1.00 ea		Transformers		\$5.00 ea	
Switches		\$1.00 ea		Motors		\$5.00 ea	
Light Fixtures		\$1.00 ea		Equipment Disconnects		\$4.00 ea	
Ceiling Fans		\$5.00 ea		Wall Outlets		\$1.00 ea	
Exhaust Fans		\$5.00 ea		Switches		\$1.00 ea	
Appliances/Equipment		\$5.00 ea		Light Fixtures		\$1.00 ea	
Swimming Pool		\$50.00 ea		PIU & VAV		\$5.00 ea	
Sign Electrical		\$50.00 ea		Exhaust Fans		\$5.00 ea	
<sup>2</sup> Basement Finish		\$50.00 ea		Swimming Pools		\$50.00 ea	
OTHER				Sign Electrical		\$50.00 ea	
TOTAL ELECTRICAL FEES				TOTAL ELECTRICAL FEES			

Note 1: Whole House Electrical single system fees shall apply to each dwelling until. No additional category fees need be listed.  
 Note 2: Basement Finish Electrical single system fees shall apply to each dwelling unit. No additional category fees need be listed.

Application Date: \_\_\_\_\_ GA Card Holder Signature: \_\_\_\_\_

# City of Alpharetta

## LOW VOLTAGE PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to install and use an electrical service system for a building or structure as described herein and shown on the City approved plans and specifications and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

**ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY**

### GENERAL INFORMATION

Project Name / Subdivision: \_\_\_\_\_ Building Permit #: \_\_\_\_\_

### PROPERTY INFORMATION

Work Site Street Address: \_\_\_\_\_ Lot/Suite: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Contact #: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### SUBCONTRACTOR INFORMATION

Company: \_\_\_\_\_ Contact #: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_

Card Holder: \_\_\_\_\_ GA Card #: \_\_\_\_\_ Class: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION & FEES -

**Minimum Permit Fee = \$50.00**

<i>RESIDENTIAL</i>				<i>COMMERCIAL</i>			
ITEM	NO	FEES	TOTAL	ITEM	NO.	FEE	TOTAL
<sup>1</sup> Townhouse-Whole House Low Voltage		\$100.00 ea		<sup>1</sup> Apartment/Condo Whole House Low Voltage		\$100.00 ea	
<sup>1</sup> Single Family Whole House Low Voltage		\$100.00 ea		Telephone System First 1 thru 20 outlets		\$50.00 ea	
				Additional Phone Outlets over 20		\$1.00 ea.	
Phone System		\$50.00					
				Data System First 1 thru 20 outlets		\$50.00 ea	
Data System		\$50.00 ea		Additional Data Outlets over 20		\$1.00 ea.	
Security System		\$50.00 ea		Security System First 1 thru 20 outlets		\$50.00 ea	
				Additional Security Outlets over 20		\$1.00 ea.	
Fire Alarm System		\$50.00 ea					
				Fire Alarm System First 1 thru 20 outlets		\$50.00 ea	
CATV System		\$50.00 ea		Additional Alarm Outlets over 20		\$1.00 ea.	
<sup>2</sup> Basement Finish		\$50.00 ea		CATV System First 1 thru 20 outlets		\$50.00 ea	
				Additional CATV Outlets over 20		\$1.00 ea.	
OTHER				OTHER			
TOTAL LOW VOLTAGE FEES				TOTAL LOW VOLTAGE FEES			

Note 1: Whole House Low Voltage fees shall apply to each dwelling until. No additional category fees need be listed.

Note 2: Basement Finish fees shall apply to each dwelling unit. No additional category fees need be listed.

Application Date: \_\_\_\_\_ GA Card Holder Signature: \_\_\_\_\_



# City of Alpharetta

## MECHANICAL PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to install and use an electrical service system for a building or structure as described herein and shown on the City approved plans and specifications and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

**ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY**

### GENERAL INFORMATION

Project Name / Subdivision: \_\_\_\_\_ Building Permit #: \_\_\_\_\_

### PROPERTY INFORMATION

Work Site Street Address: \_\_\_\_\_ Lot/Suite: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Contact #: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### SUBCONTRACTOR INFORMATION

Company: \_\_\_\_\_ Contact #: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_

Card Holder: \_\_\_\_\_ GA Card #: \_\_\_\_\_ Class: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION & FEES - Minimum Permit Fee = \$50.00

<i>RESIDENTIAL</i>				<i>COMMERCIAL</i>			
ITEM	NO	FEES	TOTAL	ITEM	NO.	FEE	TOTAL
Townhouse-Whole House HVAC <sup>1</sup>		\$100.00 ea		Apartment/Condo Whole House HVAC <sup>1</sup>		\$100.00 ea	
Single Family Whole House HVAC <sup>1</sup>		\$100.00 ea		Heat System 1-150 M Btu		\$75.00 ea	
Additional HVAC System 0-5 Ton Single System		\$50.00		Additional Heat System		\$.50 / M btu.	
Space Heater 0-150M		\$25.00 ea		AC System 0-5 Ton		\$50.00 ea	
Exhaust / Dryer Vents		\$5.00 ea		Additional AC System		\$2.00 / Ton	
Misc. Duct Work System		\$50.00 ea		Space Heater		\$.20 M btu	
Replace Furnace		\$50.00 ea		Inlet / Exhaust Air System <sup>3</sup>		\$.02 / total cfm	
Replace Compressor		\$50.00 ea		Misc. Duct Work System		\$50.00 ea	
Fire / Smoke Dampers		\$4.00 ea		Hood System - Type 1 & 2		\$2.00 sqft	
Fuel Gas Outlet		\$5.00 ea		Chiller / Refrigerator Unit		\$50.00 ea	
Basement Finish <sup>2</sup>		\$50.00 ea		Fire / Smoke Dampers		\$4.00 ea	
				Fuel Gas Outlet		\$5.00 ea	
				Clothes Dryer Outlet		\$5.00 ea	
OTHER				OTHER			
TOTAL MECHANICAL FEES				TOTAL MECHANICAL FEES			

Note 1: Whole House HVAC fees shall apply to each dwelling until. No additional category fees need be listed.

Note 2: Basement Finish fees shall apply to each dwelling unit. No additional category fees need be listed.

Note 3: Total CFMs

Application Date: \_\_\_\_\_ GA Card Holder Signature: \_\_\_\_\_





# City of Alpharetta

## PLUMBING PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to install and use an electrical service system for a building or structure as described herein and shown on the City approved plans and specifications and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

ALL APPLICABLE BLANKS MUST BE FILLED IN - NO P.O. BOX ADDRESSES - PLEASE PRINT LEGIBLY

<b>GENERAL INFORMATION</b>
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Project Name / Subdivision: \_\_\_\_\_ Building Permit #: \_\_\_\_\_

<b>PROPERTY INFORMATION</b>
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Work Site Street Address: \_\_\_\_\_ Lot/Suite: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Contact #: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

<b>SUBCONTRACTOR INFORMATION</b>
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Company: \_\_\_\_\_ Contact #: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration #: \_\_\_\_\_ Issued In: \_\_\_\_\_

Card Holder: \_\_\_\_\_ GA Card #: \_\_\_\_\_ Class: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION & FEES - Minimum Permit Fee = \$50.00

<i>RESIDENTIAL</i>				<i>COMMERCIAL</i>			
ITEM	NO	FEES	TOTAL	ITEM	NO.	FEE	TOTAL
Townhouse-Whole House Plumbing <sup>1</sup>		\$100.00		Apartment/Condo Whole House Plumbing <sup>1</sup>		\$100.00	
Single Family: Whole House Plumbing <sup>1</sup>		\$100.00		Toilet		\$5.00 ea	
Additional ½ Bath		\$25.00		Tubs/Shower		\$5.00 ea	
Tub/ Shower		\$5.00 ea		Lavatory Sink		\$5.00 ea	
Kitchen Sink		\$5.00 ea		Kitchen / Breakroom Sink		\$5.00 ea	
Bar/ Other Sink		\$5.00 ea		Bar / Medical Sink		\$5.00 ea	
Laundry Sink		\$5.00 ea		Laundry / Mop Sink		\$5.00 ea	
Hose Bibb w/VB		\$5.00 ea		Hose Bibb x/VB		\$5.00 ea	
Floor / Hub Drain		\$5.00 ea		Floor / Hub Drain		\$5.00 ea	
Dishwasher		\$5.00 ea		Roof Drain		\$5.00 ea	
WATER HEATER		\$25.00 ea		WATER HEATER / Boiler		\$25.00 ea	
Ejector / Sump Pump		\$25.00 ea		Ejector / Sump Pump		\$5.00 ea	
Sewer Install / Repair		\$50.00 ea		Sewer Install / Repair		\$50.00 ea	
Water Install / Repair		\$50.00 ea		Water Install / Repair		\$50.00 ea	
Irrigation Meter		\$50.00 ea		Medical Gas Outlet		\$5.00 ea	
Fuel Gas Outlet		\$5.00 ea		Fuel Gas Outlet		\$5.00 ea	
Misc Fixture / Outlets		\$5.00 ea		Misc Fixture / Outlets		\$5.00 ea	
Gray Water System		\$50.00 ea		Gray Water System		\$50.00 ea	
Water Wells		\$50.00 ea		Water Wells		\$50.00 ea	
Basement Finish <sup>2</sup>		\$50.00 ea		Grease Traps MUST use Grease Trap Application			
OTHER				OTHER			
TOTAL PLUMBING FEES				TOTAL PLUMBING FEES			

Note 1: Whole House Plumbing fees shall apply to each dwelling until. No additional category fees need be listed.

Note 2: Basement Finish fees shall apply to each dwelling unit. No additional category fees need be listed.

Application Date: \_\_\_\_\_ GA Card Holder Signature: \_\_\_\_\_

# City of Alpharetta

## TEMPORARY ELECTRICAL SERVICE REQUEST

Request for temporary approval of electrical service conductors and service switch.

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

Permit No: \_\_\_\_\_

Project: \_\_\_\_\_

Project Address: \_\_\_\_\_ Suite: \_\_\_\_\_

Number of days temp service requested: \_\_\_\_\_

Utility Provider  \_\_\_\_\_

This system is requested for machinery and equipment testing and check and includes fire alarm system testing and check ONLY.

- 1. The general contractor thereby assumes all responsibility for any use of electricity in the building during this temporary period. It is understood that an extension of this temporary approval must be applied for. If the work is not completed in a designated period of time the utility company will be directed to disconnect the service.*
- 2. It is understood that the inspector may refuse to extend temporary service for good and sufficient reasons.*
- 3. It is further understood that no occupancy is to be allowed during use of this temporary approval and that any occupancy will result in a disconnection of the electrical service.*

### **Contractor Statement:**

I, or We, relieve the City of Alpharetta and its employees from any liability for damages or loss due to temporary electrical service approval.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

### **Electrical Contractor Statement:**

The service equipment for which approval is being applied for above has been installed in accordance with applicable codes and is ready for inspection.

Date: \_\_\_\_\_ Company Name: \_\_\_\_\_

Electrical Contractor Signature: \_\_\_\_\_

Electrical Contractor Printed Name: \_\_\_\_\_

Card #: \_\_\_\_\_ Class: \_\_\_\_\_ Expiration: \_\_\_\_\_

# City of Alpharetta

## TEMPORARY USE PERMIT APPLICATION

**Instructions:** check box to left of requested use. Permit will be issued or denied within 30 days of receipt of all required information, signatures, and fees. DO NOT PROCEED with temporary use without first having a permit in hand. Copy of Temporary Use Permit must be on site and available to city enforcement and fire officials upon demand.

NAME OF EVENT: \_\_\_\_\_

Project Street Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Property Owner Phone: \_\_\_\_\_

Property Owner Signature Authorizing Use: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Printed Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Applicant Email: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All applications require a site plan to be submitted at time of application. All applications are subject to further limitations, as may be determined. If electrical power is required for Temporary Use, electrical permits & inspections are required. Tents CANNOT block fire lanes or Handicap parking. Fire Marshal inspection required.

### TYPES OF TEMPORARY USE

### Fee Schedule

	TYPES OF TEMPORARY USE	Fee Schedule
<input type="checkbox"/>	<b>Construction Trailer, Office or Equipment Shed</b> – 1 year time limit, Director may renew annually. Floor plan, foundation & tie-down plan, and site location plan required. Inspection required before use.	\$100 per trailer/office
<input type="checkbox"/>	<b>Real Estate Sales/Hiring Office</b> – 1 year time limit, Director may renew annually. Floor plan, foundation & tie-down plan, and site location plan required. Inspection required before use.	\$100 per trailer/office
<input type="checkbox"/>	<b>Tent Sale or temporary structure</b> – 45 day limit twice per calendar year * - Fee is only required on tents 400 sq ft and above.	\$100*
<input type="checkbox"/>	<b>Open Christmas Tree Lot</b> – 45 day time limit, off street parking plan required. AG, O-I C-1, C-2, L-I Zones Only	\$100
<input type="checkbox"/>	<b>Fruit/Vegetable Stand</b> – 45 day time limit, off street parking plan required. AG, O-I C-1, C-2, L-I Zones Only	\$100
<input type="checkbox"/>	<b>Seasonal Sales</b> – 90 day time limit. Business must be seasonal in nature and conducted within an existing permanent structure. Seasonal Sales Permits may not be renewed for a period of 180 days from the date of permit expiration.	\$100
<input type="checkbox"/>	<b>Fireworks Sales</b> – 90 day time limit. Tent or temporary structure in the L-I zone only. (PLEASE NOTE: Tent sales not permitted until 1/1/2016)	\$100
<input type="checkbox"/>	<b>Carnival, Circus, or Fair</b> – 4 day time limit. Time limits may be increased to 21 days with prior approval of City Council	\$100
<input type="checkbox"/>	<b>Religious Meetings in Temporary Structures</b> – 60 day time limit. AG, O-I C-1, C-2, L-I Zones Only. * - Includes 100.00 Fire Marshal Inspection Fee	\$200
<input type="checkbox"/>	<b>Temporary Antenna</b> – 60 day time limit – limited to special event or to meet a seasonal or temporary demand.	\$100
<b>Commercial Filming Activity</b> – 7 day time limit. Contact Office of Special Events at 678-297-6078		

Installation Date: \_\_\_\_\_

Removal Date: \_\_\_\_\_