

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 No: _____ Issued In: _____ Expires: _____

Contractor License No: _____ State: _____

Qualifying Agent: _____ Qualify Agent No. _____

WORK INFORMATION

Briefly Describe Work: _____

Front Setback: ____ Left Side Setback: _____ Right Side Setback: ____ Rear Setback: _____

Primary Use Group: _____ Use: _____ Length of wall: _____

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 Printed Name: _____ Application Signature: _____

Applicant Email: _____ Phone: _____