

APPLICATION FOR MISCELLANEOUS BUILDING PERMIT

INSPECTIONS & CODE ENFORCEMENT DIVISION

COLUMBUS, GEORGIA

DATE: _____

PERMIT NO.: _____

DISTRICT: _____

CONTRACTOR: _____

ADDRESS OF JOB: _____

OWNER: _____

WORK CLASSIFIED	OCCUPANCY
<input type="checkbox"/> DEMOLITION <input type="checkbox"/> ERECT RETAINING WALL <input type="checkbox"/> ERECT TENT <input type="checkbox"/> OTHER _____ _____ _____	<input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> BUSINESS <input type="checkbox"/> SCHOOL <input type="checkbox"/> INSTITUTIONAL <input type="checkbox"/> ASSEMBLY <input type="checkbox"/> STORAGE <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> ACCESSORY STRUCTURE

I certify that the information given in this application is true and correct to the best of my knowledge and the work authorized upon this application is to be done in accordance with the Building Code of Columbus, Georgia.

CONTRACTOR: _____ PHONE: _____

FOR OFFICE USE ONLY

FIRE DISTRICT: _____ VALUATION \$ _____

ZONE DISTRICT: _____ PERMIT FEE \$ _____

MAP _____ BLK _____ LOT _____ APPROVED BY _____