

FOR OFFICE USE ONLY							
Submittal Date:	Permit #:						

PLANNING & COMMUNITY DEVELOPMENT

eastpointcity.org

2757 East Point Street, East Point, GA 30344 * Phone: (404) 270-7212 * Fax: (404) 270-2784

(ONE FORM PER PERMIT) * ORIGNAL SIGNATURES with Notary Wet Seal (NO COPIES OR FAXES ACCEPTED)

Permit Holder = person legally responsible for Permit; Authorized Permit Agent = person pulling the permit on Permit Holder's behalf

PROJECT ADDRESS INFORMATION								
Addre	ss of Project:				Apt / Suite / Unit #:			
City:	East Point		State:	GA	Zip:			
TYPE OF AUTHORIZATION (Choose One)								
Licensed Contractor Authorizing Permit Agent:								
☐ I am a Contractor who holds a GA State License / Card (aka qualifying agent or license holder), who will be the Permit Holder, and I am authorizing the following agent to pull this permit on my behalf at the property listed above. Name of License Holder (Copy of 1D Required):								
	State Card / License # (Copy of State Ca	rd Required) :						
	Name of C	ompany:						
	Business License (BL) # (Copy of	BL Required)						
	Name of Authorized Agent (Copy of	ID Required)						
Specia	lty Trade Owner Authorizing Pern	nit Agent:						
	I am the Business Owner of a spec	ialty trade (not a licen	sed contracto	r) who will	be the Permit Holder and I am			
au	authorizing the following agent to pull this permit on my behalf at the property listed above.							
	Name of Business Owner (COPY of	ID Required)						
	Name of C	ompany:						
Business License (BL) # (Copy of BL Required):								
	Name of Authorized Agent (Copy of	ID Required)						
Homeowner Authorizing Permit Agent:								
☐ I am the Homeowner of the property above who will be the Permit Holder and I am authorizing the following agent to pull this permit on my behalf.								
	Name of Homeowner (copy of	ID Required) :						
	Name of Authorized Agent (Copy of	ID Required)						
DESIGNATION OF AUTHORIZAION								
I, the Permit Holder, hereby designate the above listed Authorized Permit Agent to apply for and obtain the permit(s) for the project listed above. I do hereby affirm and swear, under oath, that all information on this form and on accompanying documents are true and correct.								
C	Priginal Signature of Permit Holder	r (no copies or faxes a	accepted)		Date			
	NOTARY PUBLIC	My Commis	ssion Expires:		(Notary Seal)			