



<b>FOR OFFICE USE ONLY</b>
Submittal Date: _____
Permit #: _____

**PLANNING & COMMUNITY DEVELOPMENT**

*eastpointcity.org*

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

**SUBMITTAL FORM**  
**FEES ARE NON-REFUNDABLE**

**PROJECT ADDRESS**

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

**APPLICANT**

Architect/Engineer     Contractor     Homeowner     Other: \_\_\_\_\_

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

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

Address: \_\_\_\_\_ Suite: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

**PROPERTY OWNER**

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

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

Address: \_\_\_\_\_ Suite: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

**PROJECT DETAILS**     Commercial     Residential    **ESTIMATED VALUE \$** \_\_\_\_\_

Description of work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLAN REVIEW**     I will attend     I will not attend

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Review Date: \_\_\_\_\_ Time: \_\_\_\_\_ Review #: \_\_\_\_\_ Initials: \_\_\_\_\_

This application is not a permit until fees are received and site plans are approved. Any work prior to permit issuance is prohibited.	Accepted forms of payment: Cash, Credit Card, ATM Card, Cashier's Check, Business Check or Money Order. <b>Fees are non-refundable.</b>
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