



City of Blakely Building Permit

Fee Amt.: \$ _____ Permit #: _____
Check #: _____
Cash: _____

Legal Description: _____ Parcel #: _____
Job Address: _____ Zone: _____

Type of Permit Requested: _____ Sq. Ft: _____
Cost of Job: _____ Use of Building: _____
Brief Description of Work: _____

(If new construction, provide a copy of the drawings, a bill of sale, and a copy of the plat.)

If digging is required, has a permit been issued to dig? _____
Permit #: _____ Expiration Date: _____

If Manufactured Home Set-Up: (Provide copy of Bill of Sale)

Year Manufactured: _____ Serial #: _____
Located in: Mobile Home Park: _____ Owners Lot: _____ Rented Lot: _____
(Provide a copy of the rental agreement, lease, or plat.)

Work to be performed by: Owner _____ Contractor _____

Property Owner: _____
Owner Address: _____
Phone #: _____ E-mail: _____

Contractor Name: _____
Primary Contact: _____
Contractor Address: _____
Phone #: _____ E-mail: _____
Georgia License Number: _____
Expiration Date: _____ Business License #: _____

Applicant: _____ Date: _____
(Owner of Agent)

Office Use:

Application Approved: _____ Denied: _____

Date: _____
Building Inspector