

**NO PERMIT
WILL BE
ISSUED IF THIS
FORM IS NOT
FILLED OUT
COMPLETELY.**

**TOWN OF TURIN BUILDING DEPARTMENT
26 SOUTH HUNTER STREET
P.O. BOX 86
TURIN, GEORGIA 30289
770-599-0777
townofturin@charter.net
COMMERCIAL BUILDING PERMIT APPLICATION**

All Permits Expire One Year From Date Of Issue

NAME OF PROPERTY OWNER _____

ADDRESS _____

PHONE NUMBER _____

CONSTRUCTION ADDRESS _____

ESTIMATED VALUE OF BUILDING _____

SQUARE FEET OF CONSTRUCTION _____

TYPE OF CONSTRUCTION _____

Number of stories _____ Number of rooms _____
Number of bathrooms _____

CONTRACTOR _____

ADDRESS _____

PHONE _____

CHECK ALL THAT APPLY

DISHWASHER- Yes { } No { }

GAS LINE:- Yes { } No { }

TYPE OF HEAT – GAS { } ELECTRIC { } CENTRAL { } SPACE HEATERS { }
FIREPLACE { } WOOD HEATER { }

WATER HEATER – GAS { } ELECTRIC { }

DRYER - GAS { } ELECTRIC { }

ELECTRICAL SERVICE _____ AMPS POWER COMPANY: _____

SLAB FOUNDATION _____

SEPTIC SYSTEM _____ SIZE _____ DRAIN LINE _____

LOCATION IN FEET OF BUILDING FROM ROAD _____

NOTE:

ORIGINAL AFFIDAVITS REQUIRED FOR ALL SUBCONTRACTORS AND MUST BE LICENSED AND MUST PERMIT EACH JOB PERSONALLY. WE REQUIRE PROOF OF STATE LICENSE.

ELECTRICAL _____

PLUMBING _____

MECHANICAL _____

Signature of Property Owner or Agent of Property Owner

Date

THIS PERMIT BECOME NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN SIX (6) MONTHS, OR IF CONSTRUCTION OR WORK ON SITE IS SUSPENDED OR ABANDONED FOR A PERIOD OF SIX (6) MONTHS AT ANY TIME AFTER THE WORK HAS COMMENCED.

Permit Number _____

Payment _____ Date _____