

CITY OF POOLER
APPLICATION FOR BUILDING PERMIT

100 SW Hwy 80, Pooler, GA 31322
Phone No.: 912-748-6652
Pooler-ga.gov

OFFICE USE ONLY

Permit #: _____

PIN# _____

Project Address: _____ Lot No. _____
Lot Size: _____ Size of Bldg. _____ Total Sq. Ft. of Bldg.: _____ Bldg. Height: _____
Owner: _____ Mailing Address: _____
Email Address: _____ Phone No.: _____
Contractor: _____ Mailing Address: _____
Email Address: _____ Phone No.: _____
Architect/Engineer: _____ Mailing Address: _____
Email Address: _____ Phone No.: _____

Use: S. Fam. Res. Multi-Fam. Res. Accessory Com. Bldg. Industrial Other
Class of Work: Erect Addition Alteration Repair Move Demolish Other

Describe Work: _____
Type of Insulation: _____
Type of Termite Treatment: _____
Valuation of Work: \$ _____

OFFICE USE ONLY

SPECIAL CONDITIONS: _____
FLOOD ZONE: _____ PLAN REVIEW FEE: _____ PERMIT FEE: _____

A site plan, one complete set of plans along with a digital site plan and plans must accompany a residential application. A site plan, two complete set of plans along with a digital site plan and plans must accompany a commercial application. Permit Holder agrees to hold the City of Pooler harmless on any construction covered by the permit resulting in construction of wetlands. This permit becomes null and voids if work or construction authorized is not commenced with a 6 month period, or if construction or work is suspended or abandoned for a period of 6 months at time after work is commenced.

In consideration of the granting of the above requested permit I do hereby agree that I will in all respects construct the work in accordance with the above statement and the Plans and Specifications herewith submitted, and filed in the Building Department, and in compliance with all the state and local Laws and Ordinances regulating construction.

Reviewed by: _____ Date: _____

Applicant Sign: _____

Print: _____

Date: _____



State Licensing Board for
Residential and General Contractors
Authorized Permit Agent Form

License verification by permitting office should be completed by visiting sos.ga.gov/plb/

Licensed Contractor: Individual Qualifying Agent

Name of licensed person _____

*Please attach a copy of Individual license or Company License (Reflects company and qualifying agent license number)

License number of individual or qualifying agent: _____

Name of licensed company(if applicable) _____

License number of company(if applicable): _____

I, _____, hereby designate
Licensed Individual or Qualifying Agent

_____ to apply for and obtain the permit(s) for the
*Please attach a copy of the authorized permit agent's driver's license.

project at:

Street address

Apartment or Suite Number

City

Zip Code

I, the undersigned, being the contractor as either an individual or a qualifying agent, do hereby affirm and swear, under oath, that all information on this form and on accompanying documents are true and correct.

Signature of individual or qualifying agent _____

State of _____ County of _____

Subscribed and sworn to before me this _____ day of _____
20__

Signature of Notary Public _____

Seal

**CITY OF POOLER INSPECTIONS DEPARTMENT
SUB-CONTRACTOR CERTIFICATION OF WORK**

skirby@pooler-ga.gov

PERMIT NO. _____

PROJECT ADDRESS _____

OWNER _____

CONTRACTOR _____

ELECTRICAL WORK

Date: _____ State License# _____ Business License# _____

I hereby certify that I will perform the Electrical work for the Owner/Builder stated above and I further certify that I have a valid State and Local Business License. (Attach copy of State and Local Business Licenses.)

Signature: _____

Company Name: _____

Mailing Address: _____

MECHANICAL WORK

Date: _____ State License# _____ Business License# _____

I hereby certify that I will perform the Mechanical work for the Owner/Builder stated above and I further certify that I have a valid State and Local Business License. (Attach copy of State and Local Business Licenses.)

Signature: _____

Company Name: _____

Mailing Address: _____

PLUMBING WORK

Date: _____ State License# _____ Business License# _____

I hereby certify that I will perform the Plumbing work for the Owner/Builder stated above and I further certify that I have a valid State and Local Business License. (Attach copy of State and Local Business Licenses.)

Signature: _____

Company Name: _____

Mailing Address: _____
