



# MORGAN COUNTY PLANNING AND DEVELOPMENT

150 East Washington Street, Suite 200  
 P.O. Box 1357  
 Madison, Georgia 30650  
 (706)342-4373 Office · (706)343-6455 Fax

## Mechanical Permit Application

### Owner Information

Name:		Phone:
Address:		
City:	State:	Zip Code:
Contact:	Phone:	Email:

### Project Location

Name:		Tax Map & Parcel:
Address:		
City:	State:	Zip Code:
Contact:	Phone:	Email:

### Contractor Information

Name:		Phone:
Address:		
City:	State:	Zip Code:
Contact:	Phone:	Email:
Georgia License #:	(Provide Copy)	Expiration Date:
Occupational Tax #:	(Provide Copy)	Issuing Jurisdiction:

**All contractors must provide a copy of state contractor's license and occupational tax certificate.**

### Read Before Signing

I hereby certify that all information in this application is correct and all work will comply with the all the codes adopted by the State of Georgia and Morgan County, and all applicable Federal, State and Local Laws, Ordinances and Regulations. The Morgan County Planning & Development Office will be notified and receive any changes to the approved plans and specifications for said permit.

**Applicant:**     Owner     Architect/Engineer     Contractor     Other: \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_    **Date:** \_\_\_\_\_

**Project Information**

Total cost of construction: \_\_\_\_\_

(Check all that Apply)

Occupancy Class	Construction Type	Heating System Type	Fuel Type
<input type="checkbox"/> Agricultural <input type="checkbox"/> Assembly <input type="checkbox"/> Business <input type="checkbox"/> Educational <input type="checkbox"/> High Hazard <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Mercantile <input type="checkbox"/> Residential <input type="checkbox"/> Utility/Miscellaneous	<input type="checkbox"/> Air Quality Accessory <input type="checkbox"/> Boiler <input type="checkbox"/> Duct Work Only <input type="checkbox"/> Exhaust System <input type="checkbox"/> Gas Installation <input type="checkbox"/> Grease Hood <input type="checkbox"/> New Installation <input type="checkbox"/> Replacement <input type="checkbox"/> Ventilation System	<input type="checkbox"/> Split System <input type="checkbox"/> Ductless Split System <input type="checkbox"/> Hybrid Heat Split System <input type="checkbox"/> Geothermal <input type="checkbox"/> Packaged System <input type="checkbox"/> Radiant Heat <input type="checkbox"/> Steam Radiant <input type="checkbox"/> Other _____	<input type="checkbox"/> Electric <input type="checkbox"/> Fuel Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Solar

Ventilation			Heating and Cooling				
Type	Quantity	CFM	Unit	Tons	Fan CFM	Heat Strip KW	BTU's
Commercial Kitchen Exhaust			1				
Domestic Kitchen Exhaust			2				
Dryer Exhaust			3				
Dust Conveying System			4				
Energy Recovery System			5				
Exhaust Fans			6				
Hazardous Exhaust System			7				
Smoke Control System			8				

Gas			Permit Fee	
Appliance	# of Outlets	Total BTU's	Heating & Cooling	Gas
Boiler			New Construction _____ Tons x \$20.00  Unit Replacement - \$40.00	1-5 Outlets \$30.00  Each Additional Outlet \$2.50
Clothes Dryer				
Cooking Appliance			<b>Ventilation</b>	<b>Total</b>
Fire Logs				
Heating Equipment			Flat Rate: \$35.00	Heat/Cool: _____
Incinerator or Crematory				Gas: _____
Gas Fired Machinery				Ventilation: _____
Other Gas Fired Appliance				Total: _____
Pool or Spa Heater				
Sauna Heater				
Water Heater				



## State Licensing Board for Residential and General Contractors

The Authorized Permit Agent form may be used by a licensed contractor to designate an individual to obtain permit(s) on his/her behalf for a project(s). The contractor should submit an Authorized Permit Agent Form for each project that he/she designates an individual to pull permits for. The form is to be given to the permit office in the city or county in which the project is located. Do not send a copy of this form to the Board office unless you are requested to do so.



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)