Colquitt County Construction Permit Application

Colquitt County Compliance Office
101 East Central Avenue Suite 109
Moultrie, GA 31788
(229)616-7417
compliance@colquittcountyga.gov

□ Residential □ Commercial

□ Colquitt EMC □ Georgia Power □ Other

Colquitt County Health Dept.
214 West Central Avenue
Moultrie, GA 31768
(229)589-8464

□ Fully Completed Permit Application
□ Driveway Permit (if applicable) $45
□ 1 printed or digital copy of building plans
□ Health Dept. approval of septic and water

Job site address: _____

Job description: _____

Heated Sq. Ft. _____ **Unheated Sq. Ft.** _____

Property Owner Information

Name _____
Address _____
Phone Number _____

Notice: No changes shall be made from what is stated in this application, including contractors and subcontractors, or in attached plans and specifications, except by submitting a revised application and receiving approval from the Chief Compliance Officer for such change(s). Granting of this permit shall not be construed as an approval of any violation of the building code or any state or local law regulating construction or the performance of construction. I hereby certify that I have read and understand this application and the information provided herein is true and correct. I further certify that all construction will comply with the International Building Codes and others as adopted by the State of Georgia and Colquitt County.

Applicant _____ Date _____
State License No. _____ Expiration _____

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Sub Contractor Affidavit

This form is used in lieu of subcontractors submitting individual affidavits. The primary contractor shall submit this form with all applicable subcontractors prior to the issuance of construction permits.

Job Site Address:

Electrical Contractor

Business Name _____

Phone Number _____

Owner _____

License Number _____

Expiration

Signature of licensed card holder or authorized agent

Mechanical Contractor

Business Name _____

Phone Number _____

Owner _____

License Number _____

Expiration

Signature of licensed card holder or authorized agent

Plumbing Contractor

Business Name _____

Phone Number _____

Owner _____

License Number _____

Expiration

Signature of licensed card holder or authorized agent

Notary Seal

Statement of Primary Contractor: I hereby certify that the above signatures are for the license holder or their authorized agent of the job referenced above, of which I am the primary contractor. I understand that any change of subcontractor shall be permissible provided written notification is first submitted to Colquitt County Compliance Office.

Sworn and subscribed beofre me this _____ day of _____, 20____

Notary Public

Signature of primary contractor or authorized agent

Date