



Instructions for submitting building permits online:

This application includes fillable form fields for your convenience prior to printing.

Applicant to complete number spaces only.

The application will not be accepted unless either of the signature fields are complete and permit fees included.

The application can be mailed to:

City of Clarkesville
PO Box 21
Clarkesville GA 30523

Or dropped off at:

City of Clarkesville
123 N Laurel Drive
Clarkesville GA 30523

ELECTRICAL PERMIT

City of Clarkesville, Georgia

Applicant to complete numbered spaces only.

Permit No. E24-

JOB ADDRESS			
LEGAL 1 DESCR.	LOT NO.	BLK	MAP & PARCEL NO.
OWNER 2		MAIL ADDRESS	ZIP PHONE
CONTRACTOR 3		MAIL ADDRESS	REGISTRATION NO./EXP. DATE
PHONE NUMBERS 4		OFFICE	CELL
ARCHITECT OR DESIGNER 5		MAIL ADDRESS	PHONE REGISTRATION NO.
ENGINEER 6		MAIL ADDRESS	PHONE
USE OF BUILDING 7			
8 Class of work: <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR			
9 Describe work:			

SPECIAL CONDITIONS: APPLICATION ACCEPTED BY _____ PLANS CHECKED BY _____ APPROVED FOR ISSUANCE BY _____		PERMIT FEES				
			No.	Each	Fee	
		RECEPTACLE	Total Outlets			
		LIGHT				
		SWITCH				
		LIGHTING	Total Fixtures			
		FIXTURES				
		RANGES CLO. DRYER WTR. HTR.				
		GARBAGE DISP. STA. COOK TOP				
		DISH WASH. CLOTHES WASH.				
		SPACE HTR. STA. APPL. ½H.P. MAX.				
NOTICE THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED. I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.		SIGNS	NO. TRANS.			
			NO. LAMPS			
		TEMP. POWER <input type="checkbox"/> POLE <input type="checkbox"/> UNDGD.				
		SERVICE	0-200A			
			201-400A			
		<input type="checkbox"/> NEW	401-600A			
		<input type="checkbox"/> CHANGE	OVER 600A			
		PERMIT ISSUING FEE			\$	
		TOTAL FEE			\$	

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH PERMIT VALIDATION CK. M.O. CASH

Office Use only: Please print 4 copies. Original - Inspector | 2 - City Clerk | 1 - Construction Book | 1 - Applicant