



## CODE DEPARTMENT RESIDENTIAL BUILDING PERMIT APPLICATION

Phone: 770-207-4674 Email: [permits@monroega.gov](mailto:permits@monroega.gov)

**OFFICE PERMITTING HOURS: 8:00 a.m. – 4:00 p.m.**

Date: \_\_\_\_\_ Project Name & Lot #: \_\_\_\_\_

**Construction Address:** \_\_\_\_\_

Property Owner: \_\_\_\_\_ Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

General Contractor Name: \_\_\_\_\_ 24 Hour Contact: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**NOTE: A SITE PLAN IS REQUIRED TO BE SUBMITTED WITH THIS APPLICATION. ALL PROPERTY LINES MUST CLEARLY BE IDENTIFIED ON SITE PRIOR TO THE FIRST INSPECTION.**

### Square Footage

Total: \_\_\_\_\_

1<sup>st</sup>: \_\_\_\_\_

2<sup>nd</sup>: \_\_\_\_\_

Garage: \_\_\_\_\_

# of Parking Spaces: \_\_\_\_\_

Basement: ☐ Heated \_\_\_\_\_

Bonus Room: ☐ Heated \_\_\_\_\_

Porches/Decks/Patios: ☐ Covered \_\_\_\_\_

Total Heated Sq. Ft. \_\_\_\_\_

### Height

# of Stories: \_\_\_\_\_

(Check Zoning Ordinance for Max Heights)

Building Height: \_\_\_\_\_

# of Elevators: \_\_\_\_\_

☐ Unheated \_\_\_\_\_

☐ Unheated \_\_\_\_\_

☐ Uncovered \_\_\_\_\_

Total Unheated Sq. Ft. \_\_\_\_\_

### Layout

# of Bedrooms: \_\_\_\_\_

# of Bathrooms: \_\_\_\_\_

# of Other Rooms: \_\_\_\_\_

# of Fireplaces: \_\_\_\_\_

**Valuation:** \$ \_\_\_\_\_

Basement Type: Block ☐ Poured ☐

Foundation Type: Slab ☐ Crawl Space ☐

Roof Truss ☐ Floor Truss ☐

Electric Co.: \_\_\_\_\_

Gas Co.: \_\_\_\_\_

Basement Height: \_\_\_\_\_

Fireplace: Pre-Fab ☐ Masonry ☐

Stick Frame ☐

Water Co.: \_\_\_\_\_

**NOTE: All lots must have street frontage sidewalks installed prior to initial CO's in newly developed subdivisions.**

### **APPLICANT, PLEASE READ AND SIGN THE FOLLOWING:**

As the contractor, builder or authorized agent, I hereby apply for a permit to erect/alter and use the structure as described herein and/or shown on accompanying plans and specifications. If a plot plan is required said structure is to be located as shown on the plot plan. If the permit is granted, I shall construct it according to the laws of City of Monroe. I also understand that the structure authorized by the permit shall not be occupied or used until all inspections have been made and the Certificate of Occupancy/Completion has been approved by the Code Department. **Applicant must hold a valid business license and contractor's license for the type of construction to be permitted, if applicable. Permit is void if work does not begin within 6 months of issuance. If project is not finished within one year of issuance, please contact the Code Office to renew permit.**

I hereby certify that the above information is true and correct and **I understand that before any inspections are made that erosion control measures shall be installed and properly maintained daily.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

215 N Broad Street • PO Box 725 • Monroe GA 30655  
770-207-4674 • [permits@monroega.gov](mailto:permits@monroega.gov)