PLANNING & COMMUNITY DEVELOPMENT

eastpointcity.org

2757 East Point Street, East Point, GA 30344 | Phone: (404) 669-4399, option 3 | Email: permits@eastpointcity.org This application is not a permit until fees are received and drawings/plans (if applicable) are approved. Any work prior to permit issuance is prohibited. Permits are non-transferable and Fees are Non-Refundable! All permit applications are to be completed and submitted through the BS&A Online Permitting Portal: <a href="https://bsaonline.com/?uid=2757">https://bsaonline.com/?uid=2757</a> PROJECT ADDRESS: Unit/Suite/Apt#: Parcel: How to Apply Online: ☐ Residential ☐ Commercial After Setting Up Your Online Account, ERMIT INFORMATION Fee: 1. Go to BS&A Portal. \$75.00 Base Permit Fee + # of 2. Click on Apply for Permit Fixtures (\* \$25) + Plan Review Fee Building Department + \$45.00 Admin Fee an Plan Review: Apply for a Permit (Fire Alarm or Sprinkler submittals Apply for a Planning, Zoning require a plan review. Commercial or Engineering Process drawings must be stamped by design professional.) 3. Step 1: Put in street number of address, locate address, and click Next. Permit Type (Required): 4. Step 2: Select "Pull a BUILDING, 1.  $\square$  Fire Alarm System HVAC/Mechanical, Electrical or Plumbing Permit)..." 2.  $\square$  Fire Sprinkler System 5. Select Com Fire Alarm, Com ∃. ☐ Fire Suppresion Sprinkler System or Res Sprinkler 4.  $\Box$ Irrigation Sprinkler System System (Irrigation). 武 6. Input description. See Sample Project Description (Required): below. Click Next: SPRINKLER Step 2: Enter Permit Details Use the drop down to assist with selecting the correct After chosing the type of submittal desired, typically, For Building Permits, when asked for Construction Va Value is put on the application. Number of Fixtures (Required): ☆ What would you like to do? Pull a BUILDING, HVAC/Mechanical, Elect... free Enter the permit type for which you wish to apply: Permit Holder Required Credentials: Com Sprinkler System This permit will be issued to the Please describe the work to be done in detail: Contractor doing the work. If an Sprinkler System ALARM agent is submitting on behalf of the contractor, an East Point Authorized Agent Form MUST be submitted also. 7. Step 3: Confirm Applicant information and click Next. 8. Step 4: Input Estimated Fees. Contractor: Click Next. 1. Current Business License / 9. Step 5: Attach all required M Occupational Tax Certificate documents for this submittal. This 図 2. Copy of GA State Certifications application will be required to be 3. US Issued ID of State Card uploaded. Click Next 厑 Step 6: Confirm information Holder 4. US Issued ID of Agent if and click Submit. submitting of State Card Holder



| 2757 East Point Street, East Point, GA 3   |  |  |                              |
|--|--|--|------------------------------|
| Who is the PERMIT HOLDER – the person respon (Reference the "Who Control of the c |  |  | for this permit:             |
| <ul> <li>Homeowner / Property Owner</li> <li>Tax Bill and/or Deed filed with County Required</li> <li>Stated Issued ID Required</li> </ul>   | Bill and/or Deed filed with County Required  • Current Business License Required  • Copy of State Certification (if applicable) Required  • State Issued ID Required |  |                              |
| The signature below is a binding statement that the permit h address and that the Property Owner is aware of, agrees with  |  |  |                              |
| Signature of Permit Holder (or agent):   | Date:  |  |                              |
|  | igner / Engin<br>or Permit Ho  | eer / Architect  □ Permit E<br>lder  | •                            |
| AGENT FOR PERMIT HOLDER: (All Contact  |  |  |                              |
| Name:  |  | Phone:   |                              |
| Address (Physical / No PO Boxes):  |  |  |                              |
| City:  |  | State:   | Zip:                         |
| Email:   |  | <u> </u>   |                              |
| PROPERTY OWNER: (REQUIRED – APPLICATION OWNER'S  | ON WILL N  |  | OUT PROPERTY                 |
| Name:  |  | Phone:   |                              |
| Address (Physical / No PO Boxes):  |  | <u> </u>   |                              |
| City:  |  | State:   | Zip:                         |
| Email:   |  |  |                              |
| CONTRACTOR: (All Contact Information R If contractor is to be determined, an 'ASSIGNING must be submitted with updated information   | CONTRAC  | TOR TO PERMIT AFTER :<br>gnatures before permit ca                           | SUBMISSION' form an issued.) |
| ☐State Certified Contractor  | (Roofer C  | □ Specialty Trade (Roofer, Concrete, Siding, Sheetrock, Fence, Windows, etc) |                              |
| Name:  |  | Phone:   |                              |
| Company Name:  |  | Phone (Company):   |                              |
| Address (Physical / No PO Boxes):  |  | <u> </u>   |                              |
| City:  |  | State:   | Zip:                         |
| Email:   |  | ı  |                              |
| Business License #:  |  | State Card # (if applicable  |                              |
| DESIGNER / ENGINEER / ARCHITE  |  | , , , ,  | ble):                        |
| ☐ Designer ☐ Engineer ☐ Name:  | ☐ Architect  | Phone:   |                              |
|  |  |  |                              |
| Company Name:  |  | Phone (Company):   |                              |
| Address:   |  |  |                              |
| City:  |  | State:   | Zip:                         |
| Email:   |  |  |                              |