



PEACHTREE CORNERS BUILDING DIVISION

310 Technology Pkwy., Peachtree Corners, GA 30092

Phone: (678) 691-1200 | www.peachtreecornersga.gov

AUTHORIZED PERMIT AGENT FORM

Directions:

- Complete the required fields.
- Attach a copy of the individual / qualified agent license.
- Attach a copy of the company license.
- Attach a copy of the driver's license of the person seeking to be authorized as an agent of your company.
- Attach a copy of the individual / qualifying agent photo ID, *and sign in the presence of a notary.*

Name of Licensed Individual: _____

License Number of Individual or Qualifying Agent: _____

Name of Licensed Company (if applicable): _____

License Number of Company (if applicable): _____

I, _____, do hereby designate _____
Print the name of the license holder Print the name of the authorized agent

to apply for and obtain the permits for the project located at:

Street Address: _____ **Unit / Suite Number:** _____

City: _____ **State:** _____ **Zip:** _____

I, the undersigned, being the contractor that is licensed 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 is true and correct. I further understand that the City of Peachtree Corners may revoke this authorization at any time.

Signature of Individual or Qualifying Agent: _____ **Date:** _____

County of: _____ **State of:** _____

Subscribed and sworn to before me on this, the _____ day of _____ 20 _____

Signature of Notary Public: _____

Place Notary Seal Below