



PUTNAM COUNTY PLANNING & DEVELOPMENT

117 Putnam Drive, Suite B ♦ Eatonton, GA 31024
Tel: 706-485-2776 ♦ 706-485-0552 fax ♦ www.putnamcountyga.com

Electrical Permit Application

Owner Information

Permit# 202-

Name:		Phone:
Address:		
City:	State:	Zip Code:
Contact:	Phone:	Email:

Project Location

Name:		Tax Map & Parcel:
Address:		
City:	State:	Zip Code:
Contact:	Phone:	Email:

Contractor Information

Name:		Phone:
Address:		
City:	State:	Zip Code:
Contact:	Phone:	Email:
Georgia License #:	(Provide Copy)	Expiration Date:
Occupational Tax #:	(Provide Copy)	Issuing Jurisdiction:

All contractors must provide a copy of state contractor's license and occupational tax certificate.

Read Before Signing

I hereby certify that all information in this application is correct and all work will comply with the all the codes adopted by the State of Georgia and Putnam County, and all applicable Federal, State and Local Laws, Ordinances and Regulations. The Putnam County Planning & Development Office will be notified and receive any changes to the approved plans and specifications for said permit.

Applicant: Owner Architect/Engineer Contractor Other: _____

Print Name: _____

Applicant Signature: _____ **Date:** _____

All Email submittals must be sent to pdsbmittals@putnamcountyga.us for processing



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Project Information

Total cost of construction: _____

(Check all that Apply)

Occupancy Class	Construction Type	Power Company	
<input type="checkbox"/> Agricultural <input type="checkbox"/> Assembly <input type="checkbox"/> Business <input type="checkbox"/> Educational <input type="checkbox"/> High Hazard <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Mercantile <input type="checkbox"/> Residential <input type="checkbox"/> Utility/Miscellaneous	<input type="checkbox"/> Additional Circuits <input type="checkbox"/> Fire Repair <input type="checkbox"/> Generator Installation <input type="checkbox"/> Low Voltage <input type="checkbox"/> Meter Reconnect <input type="checkbox"/> New Construction <input type="checkbox"/> Permanent Service Pole <input type="checkbox"/> Service Change <input type="checkbox"/> Solar Photovoltaic System <input type="checkbox"/> Swimming Pool/Spa <input type="checkbox"/> Temporary Service Pole	<input type="checkbox"/> Central Ga. EMC <input type="checkbox"/> Georgia Power <input type="checkbox"/> Tri-County EMC	
Low Voltage	Solar Photovoltaic System	Service Information	
<input type="checkbox"/> T.V. <input type="checkbox"/> Phone <input type="checkbox"/> Data <input type="checkbox"/> Door Bell <input type="checkbox"/> Lighting <input type="checkbox"/> Intercom <input type="checkbox"/> Security <input type="checkbox"/> Fire Alarm* <input type="checkbox"/> Emergency Responder Radio	<input type="checkbox"/> Residential Express <input type="checkbox"/> Commercial Express =<25 kw <input type="checkbox"/> Commercial Standard >25 kw <input type="checkbox"/> Ground Mount Res or Com	<input type="checkbox"/> Single Phase <input type="checkbox"/> Three Phase	<input type="checkbox"/> Overhead <input type="checkbox"/> Underground
		Total Amps: _____	
		Number of Disconnects: _____	
		Number of Panels: _____	
		Fault Current: _____	

Office Use Only

Plans Check By: _____ Approved By: _____ Date: _____

Total Fees: _____ Payment: Cash ___ Check# _____ Credit Card/Debit _____

- WORK MUST BE COMMENCED WITHIN 6/MONTHS OF ISSUANCE AND NOT BE ABANDONED IN EXCESS OF 6/MONTHS
- IF PLANS ARE ALTERED OR ADDITIONAL WORK IS DONE, AN AMENDED PERMIT MUST BE PURCHASED.
- EROSION CONTROL MANAGEMENT MUST BE PRACTICED AT ALL TIMES.
- THE ISSUANCE OF THIS PERMIT DOES NOT ALLOW OR IMPLY THE RIGHT TO VIOLATE ANY CODE OR ORDINANCES ADOPTED BY THE CITY OF EATONTON OR PUTNAM COUNTY.

CONTRACTOR/OWNER SHALL REMAIN RESPONSIBLE FOR CODE COMPLIANCE

PLEASE CALL 811 BEFORE YOU DIG



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Electrical Permits

Service installation (conductors and equipment for delivering energy from the electrical utility supply system): each service or sub-service requiring a utility-owned meter shall be considered a service for fee purposes:

Electrical Permits		
Service	Residential/Agricultural	Commercial/Industrial
200 amps and under	\$125	\$135
Over 200 amps	\$125 plus \$65 per 100 amps	\$135 plus \$65 per 100 amps
Additional Circuits	\$55	\$110
Generator Installation	\$55	\$110
Low Voltage	\$65	\$110
Meter Reconnect	\$65	\$110
Permanent Service Pole	Based on the number of amps	Based on the number of amps
Service Change	\$55	\$110
Electricity to Dock (ground fault breaker required)	\$55	\$110
Modular	\$55 for every additional 100 AMPS over 200 AMP base	
Swimming Pool/Spa	\$55	\$110
Temporary Service Pole	\$65	\$65

Solar Energy Permits				
	Permit Type	Building	Electrical	Total
Residential	Express Res		\$120.00 Min	\$120.00
Commercial <=25 kW	Express Com		\$120.00 Min	\$120.00
Commercial > 25 kW	Standard Com	\$8 per 1,000 sf	\$120.00 Min	
Ground Mount	Standard (Res or Com)	\$8 per 1,000 sf	\$120.00 Min	



State Licensing Board for Residential and General Contractors

The Authorized Permit Agent form may be used by a licensed contractor to designate an individual to obtain permit(s) on his/her behalf for a project(s). The contractor should submit an Authorized Permit Agent Form for each project that he/she designates an individual to pull permits for. The form is to be given to the permit office in the city or county in which the project is located. Do not send a copy of this form to the Board office unless you are requested to do so.



State Licensing Board for
Residential and General Contractors

Authorized Permit Agent Form

License verification by permitting office should be completed by visiting sos.ga.gov/plb/

Licensed Contractor: _____ Individual _____ Qualifying Agent

Name of licensed person _____

*Please attach a copy of Individual license or Company License (Reflects company and qualifying agent license number)

License number of individual or qualifying agent: _____

Name of licensed company(if applicable) _____

License number of company(if applicable): _____

I, _____, hereby designate
Licensed Individual or Qualifying Agent

_____ to apply for and obtain the permit(s) for the

*Please attach a copy of the authorized permit agent's driver's license.

project at:

Street address

Apartment or Suite Number

City

Zip Code

I, the undersigned, being the contractor 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 are true and correct.

Signature of individual or qualifying agent _____

State of _____ County of _____

Subscribed and sworn to before me this _____ day of _____ 20__

Signature of Notary Public _____

(Seal)