



Permit #: _____

MINOR SITE WORK PERMIT APPLICATION

Site Address:	Suite:	Zip:
<input type="checkbox"/> Stand-Alone Permit <input type="checkbox"/> Work Related to Permit #:	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	

PROPERTY

Parcel # _____ - _____ - _____ - _____	Zoning:	Zoning Case #:	
Property Owner of Record:		Phone:	
Address:		Suite #:	
City:	State:	Zip:	
Signature of Property Owner or Owner's Representative:			Date:

CONTRACTOR

Company Name:		Phone:	
Contact:		E-Mail:	
Address:		Suite #:	
City:	State:	Zip:	
Business License #:	Expires:	<i>Attach copy of business license and photo ID</i>	

APPLICANT

Applicant is: <input type="checkbox"/> Contractor (see above) <input type="checkbox"/> Authorized Permit Agent (<i>complete this section and attach notarized Authorized Permit Agent form with copy of permit agent's photo ID</i>)	
<input type="checkbox"/> Property Owner (see above)	
Applicant:	Phone:
Company Name:	E-Mail:
Address:	Suite #:
City:	State: Zip:

WORK INFORMATION

<input type="checkbox"/> I certify that no trees will be removed or impacted as a result of this project. <i>Initial:</i>	Is work area in stream buffer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Describe Work to be Performed and Materials Used:	Est. Value of Work (Labor and Materials):
SITE PLAN (drawn to scale) showing existing structures and proposed work must be submitted with application.	

Total area of property: _____ acres/SF	Type of Project (check all that apply): <input type="checkbox"/> Increase impervious area (survey required) <input type="checkbox"/> Landscaping <input type="checkbox"/> Paving/concrete <input type="checkbox"/> Retaining wall < 4' high <input type="checkbox"/> Paving system <input type="checkbox"/> Land disturbance < 5,000 SF <input type="checkbox"/> Driveway replacement/expansion <input type="checkbox"/> Drainage improvements <input type="checkbox"/> Other _____
Area to be disturbed: _____ acres/SF	
Existing impervious area: _____ SF	
Proposed added impervious area: _____ SF	
Proposed total % impervious area: _____ %	

CERTIFICATION

I 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 state or local law regarding construction or the performance of construction. I understand that I am responsible for obtaining all required inspections. The work must begin and the first inspection passed no more than 180 days from the issue date of the permit or the permit is EXPIRED. All required plans and contractor's licenses must be submitted with the completed application. If any information is found to be false or misrepresented, the permit will be deemed invalid. I agree to indemnify and hold harmless the City of Brookhaven from all damages, demands, or expenses of every character which may in any manner be caused by the work permitted.

Applicant's Signature: _____ Date: _____