ROCKDALE COUNTY PLANNING AND DEVELOPMENT
ELECTRICAL PERMIT APPLICATION

PROPERTY INFORMATION:

<table>
<thead>
<tr>
<th>Address of project:</th>
<th>City &amp; State:</th>
<th>Zip:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot number:</td>
<td>Subdivision name:</td>
<td></td>
</tr>
</tbody>
</table>

PROPERTY OWNER INFORMATION:

<table>
<thead>
<tr>
<th>Name of property owner:</th>
<th>Current address:</th>
<th>City &amp; State:</th>
<th>Zip:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone:</td>
<td>Email:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

CONTRACTOR INFORMATION:

<table>
<thead>
<tr>
<th>Name of company:</th>
<th>Name of main contact:</th>
<th>Address:</th>
<th>City &amp; State:</th>
<th>Zip:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone:</td>
<td>Email:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

WORK PERFORMED:

| ☐ New service - number of amps: | ☐ Service change - number of amps: |
| ☐ Rewire - number of amps:      | ☐ Swimming pool - number of amps: |
| ☐ Reconnection                   |                                       |

Meter base (check if applies):  
- ☐ Replace with same size
- ☐ Upgrade
- ☐ Relocate
- ☐ Convert from overhead to underground
- ☐ Convert from single phase to three phase
- ☐ Change to meter base/disconnect combination

Switch panel/disconnect/breaker (check if applies):
- ☐ Replace with same size
- ☐ Upgrade
- ☐ Change from fuse type to breaker panel
- ☐ Wire in outside disconnect to existing meter base

Fee:
- ☐ ≤400 amps: $50
- ☐ >400 amps: $100 +$0.20 per amp over 400

Power Company:
- ☐ Snapping Shoals EMC
- ☐ Walton EMC
- ☐ Georgia power

Entrance cable (check if applies):
- ☐ Replace with same size
- ☐ Upgrade wire size
- ☐ Replace weather head

PLEASE PRINT NAME OF APPLICANT: __________________________________________________
SIGNATURE OF APPLICANT: ___________________________________________ Date: ___________

Department of Planning and Development contact information:

In person: 958 Milstead Avenue, Conyers, GA 30012   •   Monday through Friday, 8:00am to 5:00pm
Mail: P.O. Box 289, Conyers, GA 30012                Phone: 770 278-7100
Email: permit@rockdalecountyga.gov                    Fax: 770 278-8940

Updated 05/2017
O.C.G.A. 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a Permit or License, as referenced in O.C.G.A. 50-36-1, from Rockdale County, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

☐ I am a United States citizen.

☐ I am a legal permanent resident of the United States.

☐ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: __________________________

**Wait to be in front of the notary before signing**

_________________________, the undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

__________________________

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in Conyers, Georgia, this _____ day of ______________, 20 ______.

Notary Public signature

Applicant signature

GA Registration No. and expiration date

Seal: