ROCKDALE COUNTY PLANNING AND DEVELOPMENT
HVAC PERMIT APPLICATION

Date: ____________________

PROPERTY INFORMATION:

<table>
<thead>
<tr>
<th>Address of project:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot number:</td>
<td>Subdivision name:</td>
</tr>
</tbody>
</table>

PROPERTY OWNER INFORMATION:

| Name of property owner: |  |
| Current address:        |  |
| Phone:                 | Email: |

CONTRACTOR INFORMATION:

| Name of company:       |  |
| Name of main contact:  |  |
| Address:               |  |
| Phone:                 | Email: |

WORK PERFORMED:

☐ New service
☐ Replacement

Number of air conditioner units: _______
Number of furnace units: _______
Number of heat pump units: _______

☐ Gas line
☐ Pressure check for gas meter replacement

Fee: $50.00 per unit, payable by check, money order, credit card or *exact* cash.

PLEASE PRINT NAME OF APPLICANT: __________________________________________________________
APPLICANT SIGNATURE: ____________________________________________________________________

Department of Planning and Development contact information:

| In person: 968 Milstead Avenue, Conyers, GA 30012  | Phone: 770 278-7100 |
| Mail: P.O. Box 289, Conyers, GA 3001               | Phone: 770 278-8940 |
| Email: inspections@rockdalecountyga.gov           |

Updated 01/2019
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:

Updated 01/2019