



ROCKDALE COUNTY PLANNING AND DEVELOPMENT
DEMOLITION PERMIT

Date: _____

SUBMIT:

- Proof of ownership of the land and structure
• Copy of the contractor's business license
• Commercial property: Copy of the asbestos and or lead test report and copy of the Asbestos Waste Shipment Document if applicable,
• E&SC plan if applicable
• \$50 fee (check, credit card, money order or exact cash)

PROPERTY INFORMATION:

Address of project:
Lot number: Subdivision name:

PROPERTY OWNER INFORMATION:

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

CONTRACTOR INFORMATION:

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

STRUCTURE:

Type: [] Brick [] Stucco [] Metal [] Frame [] Other:
Square footage: Number of floors:

I, _____, allow Rockdale County inspectors to enter the property and the structure.

Signature

Department of Planning and Development contact :

Table with contact information: In person: 968 Milstead Avenue, Conyers, GA 30012 Monday through Friday, 8:00am to 5:00pm; Mail: P.O. Box 289, Conyers, GA 3001; Phone: 770 278-7100; Email: inspections@rockdalecountyga.gov; Fax: 770 278-8940

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 Nationality Act with an alien number issued by the Security or other federal immigration agency. Immigration and
Department of Homeland

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: