



**ROCKDALE COUNTY**  
**Permit Application**

**OSBORN NESBITT, SR.**  
**CHAIRMAN**

1496 Rockbridge RD NW  
Conyers, GA 30012  
(770) 278-8401 FAX (770) 278-8930  
ICHIEFS ID – RCFRHQ

**MARIAN MCDANIEL**  
**FIRE CHIEF**

**Project Address:** \_\_\_\_\_

**Project/Subdivision:** \_\_\_\_\_

<b>Owner/Contractor:</b>
<b>Street Address:</b>
<b>City/State/Zip Code:</b>
<b>Telephone:</b>
<b>Email:</b>

<b>Engineer/Architect:</b>
<b>Street Address:</b>
<b>City/State/Zip Code:</b>
<b>Telephone:</b>
<b>Email</b>

<b>Point of Contact Name:</b>	<b>Telephone:</b>	<b>Email:</b>
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**Proposed use:**

**Class Of Work:** New Interior Finish Fire Protection Repair Operational Permit Access Road Gate

**Describe Work:** \_\_\_\_\_

**Building Evaluation:** \$ \_\_\_\_\_

**Size of Structure (total sq. ft.):** \_\_\_\_\_

**Number of Stories:** \_\_\_\_\_

Application is hereby made according to the requirements of the Code of Ordinance, County of Rockdale, Georgia for a permit to erect/alter and use structure as described herein. I/We agree to conform to all laws, ordinances, and resolutions regulating same.

\_\_\_\_\_  
**Signature of Contractor or Authorized Agent**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Type of State License**

\_\_\_\_\_  
**State License Number**

\_\_\_\_\_  
**Expiration Date**