



Department of
CITY PLANNING

OFFICE OF BUILDINGS
TRADE PERMITS DIVISION
55 Trinity Avenue, 3rd Floor, Suite 3800
Atlanta, Georgia 30303
(404) 865-8550

**TEMPORARY
POWER
Permit Application**

PLEASE NOTE: An Electrical Permit must be obtained prior to applying for a Temporary Power Permit

Issued By	Building Permit Number: _____	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
	JOB ADDRESS	Street Address _____ Suite / Unit Number _____	
	CONTRACTOR INFORMATION	Business Name _____	
Issue Date	<input type="checkbox"/> Check Box	License Holder's Name _____ Company Name _____	
	if Contractors	Street Address _____	
	Phone Number, Fax	City _____ State _____ Zip Code _____	
	Number, and/or	Phone _____ Fax _____ Email _____	
	Address changed so	State License Number _____ Business License Number _____	
our records can be			
updated.			
Permit Number	Date: _____		
	Please issue a Temporary Power Approval permit for address listed above for: _____ 30 days (Residential) _____ 90 days (Commercial)		
	I/We, the undersigned, hereby assume all liability and responsibility for any use of electricity in the building during this temporary period. It is understood that the power company will be directed to discontinue service at the end of the Approval period. If work has not been completed at the time of permit expiration, an application must be submitted for extension of this Temporary Power Approval.		
	It is further understood that occupancy cannot be allowed during use of Temporary Power and that any occupancy will result in disconnection of electrical service. We relieve the City of Atlanta and its Inspectors of any liability for damage or losses if electric service is disconnected from the wiring system.		
FOR OFFICE USE ONLY	_____ General Contractor/Electrician/Home Owner Mailing Address _____		
	<u>CONTRACTORS STATEMENT</u>		
	The service equipment for which this approval is sought will be installed in accordance with all applicable codes. The equipment will be ready for Temporary Power on date: _____.		
	_____ General Contractor/Electrician / State License # Mailing Address _____		
	\$150 Minimum Base Permitting Fee		Permitting Fees: \$ _____
Inspections can be scheduled through the automated system by calling (404) 658-6800		Technology Fee: \$ 25.00	
		Total Fees: \$ _____	