



CITY OF ATLANTA

Keisha Lance Bottoms
MAYOR

55 TRINITY AVENUE, S.W.
SUITE 4900, CITY HALL SOUTH
ATLANTA, GEORGIA 30303-3531
TEL. (404) 330-6501
FAX. (404) 658-7085

DEPARTMENT OF PUBLIC WORKS
WILLIAM M. JOHNSON
Commissioner

QUALIFIED CONTRACTOR PERMIT APPLICATION

Date: _____ Business License # _____

Business: _____

Business Address: _____

Email: _____

Contact Person _____ Phone#: _____

Work Location: _____ between _____ & _____

Date Work to Begin: _____ Date of Completion _____

Nature of Work: Mark all that apply

<input type="checkbox"/>	Driveway Apron	<input type="checkbox"/>	Sidewalk Construction	<input type="checkbox"/>	Granite Curb	<input type="checkbox"/>	Concrete Curb & Gutter
<input type="checkbox"/>	Sanitary Sewer	<input type="checkbox"/>	Storm Sewer	<input type="checkbox"/>	Sidewalk Flume	<input type="checkbox"/>	Other (specify)

Are Metal Plates going to be used? Yes No If yes, How many?

- 1) A performance bond and maintenance bond are required in the amount of the "value of the proposed work or to restore the public right-of-way to its condition prior to the commencement of work"
- 2) Provide a Certificate of Liability Insurance ***CITY OF ATLANTA*** must be shown as the certificate holder
Required Insurance is \$1,000,000 per occurrence and \$2,000,000 aggregate *

Insurance Information

Expiration Date : _____ Policy # _____

Producer: _____

Address: _____

INTERNAL USE ONLY

** City of Atlanta agency responsible for inspecting this project _____

Received by: _____ Permitted by: _____

Inspector _____ **CALL before you start working!!!!**

Initial inspection Date: _____ Approved _____ Rejected _____

Follow-up inspection(s) Date: _____

Date approved _____ Comments; _____

Signature for approval _____ Inspector: _____