

TOWN OF BRASELTON
PLANNING AND DEVELOPMENT DEPARTMENT
4982 Highway 53, Braselton, Georgia. 30517 (706) 654-3915 voice
706-654-9237 Fax kdkeller@braselton.net e-mail

SUB-CONTRACTOR CERTIFICATION

Date: _____

Notice: This form must be completed, signed, and submitted to the Planning and Development Department prior to the issuance of any permit or commencement of work. Faxed or e-mailed copies are acceptable

SUBDIVISION: _____ LOT: _____

PERMIT NUMBER (if this form is for a building/trade permit application pending, then leave this line blank):

JOB SITE ADDRESS: _____

GENERAL CONTRACTOR: _____

This is to certify that I am responsible for the: Electrical Plumbing HVAC
Please check below the type of license you hold and are using for this job:

- Electrical Contractor Class I (Restricted to Single Phase, not exceeding 200 Amps)
- Electrical Contractor Class II (Unrestricted)
- Master Plumber Class I (Restricted to S/F, Single level duplex & Commercial up to 10k sq.ft.)
- Master Plumber Class II (Unrestricted)
- Conditioned Air Contractor Class I (Restricted to 60k BTU Cooling & 175k BTU Heating)
- Conditioned Air Contractor Class II (Unrestricted)

In the event of any change in my status on this installation, I understand that I will be held responsible for the job until the Planning and Development Department has been notified, in writing, of any change.

SIGNATURE (**ORIGINAL**): _____

PRINTED NAME: _____

STATE LICENSE # _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

BUSINESS PHONE: _____ CELL PHONE: _____