



# Greene County Building Inspection Division

## PUBLIC RIGHT OF WAY UTILITIES PERMIT APPLICATION

  
 706-453-3333  
 fax 706-453-2579  
 1034 Silver Dr  
 Suite 103  
 M-F 8am-5pm

Chuck Wooley    Renee' Criswell    Jamie Brantley    Brad Cherry    Scott Allen  
 Building Official    Office Manager    Permit Clerk    Building Inspector    Code Enforcement

1034 Silver Dr., Ste 103, Greensboro, GA 30642 Telephone 706-453-3333 www.greencountyga.gov

**OFFICE USE ONLY:**

Permit Number: \_\_\_\_\_ Permit Fee: \_\_\_\_\_ Date Approved: \_\_\_\_\_  
 Approved By: \_\_\_\_\_

**CAREFULLY READ AND INITIAL ACKNOWLEDGING YOUR UNDERSTANDING OF THE FOLLOWING STATEMENTS:**

- \_\_\_\_\_ Initial. A schematic drawing of the construction plans of the utility facility and a plat or map showing the location of the utility facility in relationship to the existing roadway, pavement or curb **must be submitted**; this includes public and private utilities.
- \_\_\_\_\_ Initial. Private utility permits **may be** required to post a construction and maintenance bond.
- \_\_\_\_\_ Initial. Private permits shall expire unless completed within ninety (90) days of issuance.
- \_\_\_\_\_ Initial. All contractors and individuals are required to have all other utilities identified and marked before any digging, or excavating begins.
- \_\_\_\_\_ Initial. **Contractors must present with this application a copy of their State of Georgia Utility Contractor's License, Proof of Identification and a current Certified Level I Blue Card issued by the Georgia Soil and Water Conservation Commission with legible Certification Number, Date Issued and Expiration Date.**

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_

Name of Road and General Location: \_\_\_\_\_  
 \_\_\_\_\_

Total Feet of Utilities to be Installed: \_\_\_\_\_ (2,640 ft = 1/2 mile)  
 Date to Begin Work: \_\_\_\_\_ Approximate Duration: \_\_\_\_\_

**Fees are as follows: \$50 for first half (1/2) mile, \$25 for each half (1/2) mile thereafter.**

\_\_\_\_\_  
 Applicant Name (Print)  
 \_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date