



**MACON-BIBB COUNTY
BUILDING AND FIRE SAFETY**

3661 Eisenhower Pkwy, Ste MB105
Macon, GA 31206
(478) 803-0466
buildingpermits@maconbibb.us

**SUBCONTRACTOR
AFFIDAVIT
APPLICATION**

NOTICE

This form must be completed and signed by the licensed contractor and submitted to Building and Fire Safety BEFORE commencing work. The licensed contractor must be registered with Building and Fire Safety before submitting any permit application or affidavit.

*****Information Is Required for Affidavit to Be Processed*****

General Contractor's Business Name: _____ GC's Permit #: _____

Project Address: _____

Subcontractor's Business Name: _____ Phone: _____

Business Address: _____ City/State/Zip: _____

Description of Work: _____

Electrical

New Service Change Service Rewire Sign Pool Alteration Addition
 Other: _____ Estimated Cost Valuation: \$ _____

Low Voltage

Telecommunications Alarm
 Other: _____ Estimated Cost Valuation: \$ _____

Mechanical

Gas Combo Ductwork
 Other: _____ Estimated Cost Valuation: \$ _____

Plumbing (Please indicate if Dwelling uses Septic System or Sewer System)

Sewer Lateral Water Heater Water Service Fixtures Gas Pool
 Other: _____ Estimated Cost Valuation: \$ _____

Specialty Contractor

Scope of Work: _____ Estimated Cost Valuation: \$ _____

I CERTIFY THE ABOVE INFORMATION IS TRUE AND CORRECT AND THAT I AM RESPONSIBLE FOR AND AUTHORIZED BY THE GENERAL CONTRACTOR TO PERFORM THE ABOVE-STATED WORK.

Subcontractor's Licensed Cardholder's Printed Name: _____

Subcontractor's Licensed Cardholder's Signature: _____ Date: _____