



**City of Holly Springs
Building Department**



P.O.Box 990
Holly Springs, Ga. 30142
Phone: 770-345-5538 Fax: 770-345-2827

Check Only One: Interior Finish Plan Review Application
 Tenant Change Review Application (No Construction)
 "White box" Plan Review Application (No Tenant)

Please Type or print legibly using blue or black ink. Only this original application with original signatures can be used for authorization to obtain a Building Permit!

Name of Development: _____ Use: _____
 Tenant Name: _____ Suite #: _____
 Address: _____ Bldg. #: _____
 District/Land Lot/Parcel #: _____ Zoning: _____ Floor Area (sq. ft.): _____
 Contact Person Name: _____ Phone Number: _____

*****Department Use Only*****

Shell Building Permit Number: _____

Building Department Plan Review: Authorized By: _____ Date: _____

Fire Marshall: Authorized By: _____ Date: _____

Environmental Health: Authorized By: _____ Date: _____

Cherokee Co. Water & Sewer Authorized By: _____ Date: _____

Building Department Permit Authorization: By: _____ Date: _____

Type of Construction: _____

Occupancy Group: _____

Max Occupant Load: _____ Cost Valuation: _____

Scope of Work Includes: Plumbing Yes No
 HVAC Yes No
 Electrical Yes No

Initial Build out: Yes No Building Permit #: _____



City of Holly Springs

SYSTEMATIC ALIEN VERIFICATION FOR ENTITLEMENTS (SAVE)

Affidavit of Compliance with O.C.G.A. 50-36-1 “Verification of Lawful Presence within the United States.”

O.C.G.A. 50-36-1 requires that applicants applying for such things as licenses for public benefits complete a signed and sworn affidavit verifying the applicant’s lawful presence in the United States. Therefore, the applicant must answer the following questions:

The applicant is a U. S. citizen or legal permanent resident at least eighteen (18) years old.

 YES NO or IF NOT:

The applicant is a qualified alien or nonimmigrant under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, at least eighteen (18) years old, and is lawfully present in the United States. **A photo static copy of the applicant’s alien card issued by the Department of Homeland Security or other federal immigration agency must be included with this document.***

O.C.G.A. 50-36-1 states that “Any person who knowingly and willfully makes a false, fictitious, or fraudulent statement of representation in an affidavit executed pursuant to this Code section shall be guilty of a violation of Code Section 16-10-20.”

I declare, under penalty of law, that this affidavit has been completed by me and is true and correct.

Signature

Date

Title

Legal Company Name

Company Address

(Must be signed by applicant. If the applicant is a corporation, must be signed by an officer of the corporation. **A STAMPED SIGNATURE IS NOT ACCEPTABLE.**)

I hereby certify that _____ is personally known, or verified by me, that the applicant signed this application after stating to me his or her personal knowledge and understanding of all statements and, under oath actually administered by me, has sworn that the statements and answers contained in this affidavit are true.

SUBSCRIBED AND SWORN BEFORE ME ON THIS
_____ DAY OF _____, 201__

Notary Public

AFFIX SEAL

*All applicants must attach a copy of a secure and verifiable document as defined in O.C.G.A. 50-36-2.