INSPECTIONS & CODE
A DEPARTMENT OF COLUMBUS CONSOLIDATED GOVERNMENT

420 10th Street
Post Office Box 1340
Columbus, Georgia 31902-1340

Telephone (706) 225-4126
Fax (706) 225-4129

Ryan Pruett
Director

FACTS TO REMEMBER
WHEN
TRANSMITTING PERMITS BY FAX
OR EMAIL

Each permit must be accompanied by the "Facsimile Transmission Sheet For Permits" prepared by the Inspections and Code Enforcement Department to include all information as indicated.

For new construction, alterations, or additions, sub-contractor permits applications (Plumbing, Gas, Mechanical, and Electrical) MUST have, on the line by Permit No., the Permit Number from the Building Permit which was issued to the General Contractor. Obtain the permit number from the General Contractor for whom the work is being performed. Subcontractor permits WILL NOT be issued until the General Contractor has obtained the Building Permit.

BUILDING PERMITS received by facsimile or e-mail and issued by charge card could experience a delay in receiving inspections. Inspections will not be made until the yellow Building Permit Card is posted on the job site. The permit card will be sent by return mail along with the permit and receipt.

Electrical permits for construction power will not be accepted without the letter of responsibility.

For each Building Permit there will be a handling fee of $3.00; for other permits or transactions, the handling fee will be $1.00. Each permit will indicate the handling fee and total fee. There is a 2.5% + $1.00 transaction fee for all credit card purchases.

CREDIT CARD AUTHORIZATION FORM

DATE_____   TIME_____

TO: FAX No: 706-225-4129   Phone: 706-653-4126

        INSPECTIONS & CODE ENFORCEMENT
        Development Resources Center
        P. O. BOX 1340
        COLUMBUS, GA 31902-1340

TOTAL NUMBER OF PAGES : _____

FROM:

    Name _____

    Company _____

    Address _____

    City/State/Zip _____

    FAX NO._____**Phone** _____

CHARGE INFORMATION:

    Card Identification (Circle One)   VISA   MASTERCARD

    Account Number _____

    Expiration Date _____

    Name on Card _____

    Authorized Signature
    For Credit Card: _____

COMMENTS: _____

_____

_____

Signed: _____