



# City of Covington

## TRADE PERMIT

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

Invoice \$: \_\_\_\_\_

**ALL STATE LICENSED SUBCONTRACTORS MUST SUBMIT THIS AFFIDAVIT.**

**PLEASE COMPLETE THE FOLLOWING AND RETURN IT WITH A COPY OF THE STATE LICENSE, DRIVER'S LICENSE AND BUSINESS LICENSE. QUESTIONS? PLEASE CALL 770-385-2021.**

### I. PROJECT NAME:

\_\_\_\_\_

Is this project related to other permitted projects? \_\_\_\_\_

Description of work to be completed: \_\_\_\_\_

### II. PROJECT LOCATION:

Address: \_\_\_\_\_

Tax ID: \_\_\_\_\_ Parcel Size (Acres): \_\_\_\_\_

Zoning District: \_\_\_\_\_

### III. PROPERTY OWNER:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

### IV. TRADE:

ELECTRICAL  HVAC  PLUMBING  LOW VOLTAGE  SPRINKLER  ALARM

### V. CONTRACTOR INFORMATION:

Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

License Holder: \_\_\_\_\_ Email: \_\_\_\_\_

State License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### VI. SIGNATURE:

By signing below, I agree that I am the licensed contractor listed on this affidavit and responsible for my trade at this project location.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print: \_\_\_\_\_