LICENSING & PERMITTING DIVISION
1117 WEST AVENUE, CONYERS, GA 30012
(770) 278-7100

ELECTRICAL PERMIT APPLICATION

Date: _____

PROPERTY INFORMATION:

Address of Project:	
Lot Number:	Subdivision Name:

PROPERTY OWNER INFORMATION:

Name of the Property Owner:	
Owner Address:	
Phone:	Email:

CONTRACTOR INFORMATION:

Name of Company:	
Name of Main Contact:	
Address:	
Phone:	Email:

WORK PERFORMED:

☐ New Service – Number of Amps:
☐ Rewire – Number of Amps:
☐ Reconnection

Meter Base (check if applies):

☐ Replace with same size
☐ Upgrade
☐ Relocate
☐ Convert from overhead to underground
☐ Convert from single-phase to three-phase
☐ Change to meter base/disconnect/combination

Entrance cable (check if applies):

☐ Replace with same size
☐ Upgrade wire size
☐ Replace weather head

☐ Service Change – Number of Amps:
☐ Swimming Pool – Number of Amps:

Switch Panel/Disconnect/Breaker (check if applies):

☐ Replace with same size
☐ Upgrade
☐ Change from fuse type to breaker panel
☐ Wire in outside disconnect to existing meter base

Fee:

☐ ≤ 400 amps: $75
☐ > 400 amps: $150+ $.30 per amp
☐ Outlets, Switches, Lights: $0.25 each
☐ Stove, Surface mount, Oven, Water heater, Dryer, etc.: $5.00 each

Power Company:

☐ Snapping Shoals EMC ☐ Walton EMC
☐ Georgia Power

Print Name of Applicant: _____
Signature of Applicant: _____

Department of Planning and Development Contact Information:

In-Person: 1117 West Avenue Conyers, GA 30012	◦ Monday – Friday, 8:00 a.m. to 5:00 p.m.
Mail: P.O. Box 289, Conyers, GA 30012	Phone: 770.278.7100
Email: inspections@rockdalecountyga.gov	Fax: 770.278.8940

Updated 09/2025

O.C.G.A. 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a Permit or License, as referenced in O.C.G.A. 50-36-1, from Rockdale County, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

☐ I am a United States citizen.

☐ I am a legal permanent resident of the United States.

☐ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

**** Wait to be in front of the notary before signing ****

_____, the undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

_____

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in Conyers, Georgia, this _____ day of _____, 20_____ .

_____ _____

Notary Public signature Applicant signature

_____

GA Registration No. and expiration date

Seal: