Development Services Division
12453 Highway 92, Woodstock, GA 30188
Office: (770) 592-6054
woodstockbuilding@woodstockga.gov
Office Hours: M - F 8 AM - 5 PM

After-Hours Construction Permit Application

Company name: _____

Street Address: _____ State: _____ Zip: _____

Contact name: _____ Email: _____

Phone number: _____ Alternate Phone Number: _____

Address/location of effected area: _____

Purpose of Construction (Demonstrate need/ hardship): _____

_____

Building Permit Number: _____ Project Start Date: _____

Please list specific dates and times construction to take place between the hours of 7pm-7am: _____

_____

_____

Please note: deviation from listed dates and/or times will require a new application)

Date of proposed completion: _____

Initial below acknowledging you have provided the required support documents

_____ Hardship / Purpose of work.

_____ List of specific dates and times.

_____ Notify residents / property owners within 750 feet of site no less than 10 days prior to start date.

I certify that the information provided is true and correct to the best of my knowledge. I understand the completion of this application does not entitle me to begin working and I must be issued an approved permit before proceeding.

_____

Print name of applicant Applicant's Signature Date

_____

Approved by: Building Official or designee (Print and sign) Date

_____

Approved by: Chief of Police or designee (Print and sign) Date

Permit number assigned: _____ Chapter 58, Sec 58-40, (b)