



City of Blue Ridge, GA
Building Department
Request for Inspection

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Blue Ridge

GEORGIA | EST. 1886

Allow at LEAST 2-Business days from current date for Inspection

Requested Date for Inspection:

Permit Number:

Jobsite Address:

General Contractor:

Name shown on license:

Telephone Number:

License Number:

Electrical Contractor:

Name shown on license:

Telephone Number:

License Number:

HVAC Contractor:

Name shown on license:

Telephone Number:

License Number:

Fuel / Gas Contractor:

Name shown on license:

Telephone Number:

License Number:

Plumbing Contractor:

Name shown on license:

Telephone Number:

License Number:

Contact Name:

Phone Number for access:

TYPE OF INSPECTION REQUESTED:

Foundation

Foundation Wall

Slab

Temporary Service Pole

Framing

Service Entrance, p. Meter

Rough in Electrical

Rough in Plumbing

Rough in Gas

Rough in Mechanical

Final Electrical

Final Structure

Final Plumbing

Final Mechanical

Final Gas

Date Inspection Completed: _____

Remarks:

Release to Power Company: Yes _____ No _____