P.O. Box 1390 • 10 North Public Square • Cartersville, Georgia 30120 Telephone: 770-387-5600 • Fax: 770-387-5605 • www.cityofcartersville.org

RETAINING WALL PERMIT APPLICATION

This application must be accompanied by a wall design signed and sealed by a Georgia registered engineer and a site plan showing the lot, house location, wall location(s), top-of-wall elevations, direction of wall face and distances from property lines as well as easements and buffers.

PERMIT #:	DATE	i:	
Property Owner:			_ Phone #:
Property Address:			_
City:	_State:		_ Zip:
Subdivision:		Lot#:	
Contractor/Company:			_State License #:
Address:			
City:	_State		Phone:
☐ Sewer or ☐ Septic SqFt	_ Construction Cost:		
Signature of Applicant:	Print	ed Name: _	
Zoning Information: Length of wall: Height of wall at highest point above grade: Closest distance to a property line:			
***********	*******	*****	********
Zoning Approval / Comments:			
Public Works Approval / Comments:			
State Erosion Control Cert. Required ☐ YES			
Building Department Approval			