

City of Lyons

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Lyons, GA 30436
Office (912) 526-3626
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Building Permit Application

Permit # _____

Date: _____ Current Zone: _____

Property Owner Name: _____

Site Address: _____ Tax Map Parcel: _____

Phone Number: _____

Mailing Address (if different from above): _____

City: _____ State: _____ Zip: _____

New Construction (provide with application the following): Renovation/Addition

- Site Plan (must show setbacks and property lines)
- Construction Plans

_____ Total Sq. Ft. of any construction or addition \$ _____ Cost of Improvement

Describe Work: _____

Who is responsible for this work () Owner () Tenant () Contractor

Name _____ Phone # _____

Mailing Address (if different from above): _____

City: _____ State: _____ Zip: _____

General Contractor _____

License # _____

Electrical Contractor _____

License # _____

HVAC Contractor _____

License # _____

Plumbing Contractor _____

License # _____

