

# Town of Brooks

961 Hwy 85 Connector, PO Box 96  
Brooks, Georgia 30205  
770-719-7666

## Six Month Temporary Office/Storage Trailer Application

What we need to approve your application: (Print or type)

1. Proof of ownership or Certification of Owner's Consent.
2. Owner's name and address: \_\_\_\_\_
3. Applicant's name and address: \_\_\_\_\_
4. Applicant's telephone number: \_\_\_\_\_
5. Site Plan (2 copies, showing proposed trailer, other buildings, if any on the property, and all set-backs as per current Town of Brooks regulations.)
6. Size of trailer \_\_\_\_\_.
7. Non-refundable fee of \$50.00.
8. Date \_\_\_\_\_
9. Lot number, if any, and building site address:  
\_\_\_\_\_

Note: The trailer shall be identified by a sign denoting the name of the business.

I certify that I have read this application (or declined the opportunity to do so) and state that the information provided is correct. I agree to comply with all Town of Brooks ordinances, Fayette County and state laws relating to building construction, and hereby authorize representatives of the Fayette County Building Department to enter the above-mentioned property for inspection purposes. I certify that I have a legal right to apply for the permit and to authorize entry. Additionally, I certify that this application is not in conflict with any deed restrictions of record; is in conformity with all conditions, covenants and restrictions; and I have received all approvals required.

Once this application has been approved by the Town of Brooks, a permit must be obtained from the Fayette County Building Department, 140 Stonewall Avenue West, Suite 201, Fayetteville GA 30214. They will need a copy of this form.

Signed by: \_\_\_\_\_ Title: \_\_\_\_\_

Printed name \_\_\_\_\_

Date Received \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Zoning Administrator Signature \_\_\_\_\_

Date \_\_\_\_\_