



City of Berkeley Lake  
 4040 S. Berkeley Lake Rd,  
 Berkeley Lake, GA 30096  
 City Hall (770)368-9484  
 Fax (770)368-8810  
 www.berkeley-lake.com  
 inspector@berkeley-lake.com

**Sub Contractor Affidavit**

Please supply a copy of your current state card and occupational tax certificate along with this form.

Date: \_\_\_\_\_ Have you worked in the City of Berkeley Lake previously? Yes/ No (Please circle)

Please mark appropriate space:

General Contractor \_\_\_\_\_ Electrical \_\_\_\_\_ Heating/Air \_\_\_\_\_ Plumbing \_\_\_\_\_

Project Address \_\_\_\_\_

Building Permit # \_\_\_\_\_

Company Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Fax \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Email \_\_\_\_\_

Applicants Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Cell \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Email \_\_\_\_\_

State Card Number \_\_\_\_\_ Classification \_\_\_\_\_

Occupation Tax certificate no. \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 (Business license #)

In filing this affidavit, I hereby certify that I am experienced in the classification above and am either familiar with, or will become familiar with all the requirements and will abide by all the rules and regulations set forth by the City of Berkeley Lake.

\_\_\_\_\_  
 Applicant's Signature

\_\_\_\_\_  
 Print name

For City use:

\_\_\_\_\_  
 Received by:

\_\_\_\_\_  
 Date