



TROUP COUNTY
BUILDING INSPECTION,
ZONING & PLANNING DEPARTMENT

100 Ridley Avenue
LaGRANGE, GEORGIA 30241
TEL: (706) 883-1650
FAX: (706) 883-1653

DRIVEWAY PERMIT APPLICATION

Date of Application: _____

Applicant: _____
(Full Name) (Business Phone)

(Address) (City) (State) (Zip Code)

Landowner: _____
(Full Name) (Business Phone)

(Address) (City) (State) (Zip Code)

Location of Project: _____

Tax Map: _____ Block _____ Parcel Number _____

I, _____, hereby certify that I fully understand the provisions of the
(Signature)

Troup County Procedures for Obtaining a Drainage Pipe (Driveway) Permit.

For Office Use Only

Roads and Engineering approval: _____ yes _____ no Date: _____

Building and Zoning approval: _____ yes _____ no Date: _____