



City of Springfield

Temporary Mobile Office

130 S. Laurel Street
PO Box 1
Springfield, GA 31329
(912) 754-7617

Permit# _____

This form shall be completed in addition to a Building Permit Application when a temporary mobile office / office trailer is located onsite during construction or renovation. The information provided herein will be used to assess any additional fees due to the use of the mobile office that are not already included in the permit issued for the associated construction project.

Information about the mobile office will be submitted to the Effingham Tax Assessors office. It is the applicant's responsibility to notify the Tax Assessor's office when the mobile office is removed to avoid any additional cost to the property owner and/or developer.

MOBILE OFFICE:

Duration of Occupancy: _____

Location Address: _____

Size of Mobile Office: _____

Value of Mobile Office: _____

Make _____

Year _____ Model _____

Serial Number _____

Number of Offices _____ Number of Baths _____

Sewer System: Above Ground Tank Septic Connect to City Sewer

Water Source: Above Ground Tank Well Connect to City Water

Power Source: T-pole Existing Service New Perm. Service Independent

OWNER OF MOBLIE OFFICE:

OCCUPANT INFOMATION: Same as Owner

Owner Name _____

Company Name _____

Address _____

Address _____

Contact Name _____

Contact Name _____

Phone _____

Phone _____

Email _____

Email _____