

Chatham County Department of Building Safety & Regulatory Services

P.O. Box 8161, Savannah, GA 31412-8161 912-201-4300 - Fax 912-201-4301



Gregori S. Anderson, CBO Director

Clifford Bascombe, CBO, CFM Assistant Director

RESIDENTIAL ADDITIONS PERMIT APPLICATION

P.I.N.: 1 -	_	_	PIN can be obto	nined from the Tax Asse.	ssors Office (912) 652-2	7271.
			- 			
				y contacting the MPC a		
			Phase:			
Flood Zone: _						
<u>Homeowner:</u>						
Name:				Phone No. ()		
Address:						
City:			State:		Zip:	
Person applyi	ng for per	mit:				
Name:				Phone No. ()		
Company:						
Address:						
Description of		•				
 □ Room(s)	□ Carpo	ort, Garage, St	orage \Box Other			
New addition	- square f	ootage		Conditioned: _	Yes	No
Water:	□ City	□ County	□ Private Utility	□ Community We	ell □ Private Well	
Septic Tank:	□ New		□ Existing			
Sewer:	□ City S	ewer	□ County Sewer	□ Private Util	ity	

Company:	Contractor Name:				
Phone No					
State License #	Address:				
*IF SUBCONTRACTORS WILL BE USED - COMPLETE CHATHAM COUNTY SUBCONTRACTOR LIST FORM *IF HOMEOWNER IS DOING THE WORK - COMPLETE HOMEOWNER AFFIDAVIT FORM *Cost Building \$ HVAC \$ Total Cost \$ Who will be responsible for calling in inspections? Owner Contractor Subcontractor The following information must be submitted before a permit can be issued. A. Subcontractor list with signatures / Homeowner Affidavit. B. Copy of current State and local business license for builder and all subcontractors. C. Two copies of a plot plan (not larger than 11 ½ by 17). D. Two sets of construction drawings with typical wall section attached to each set. If property is in an AE flood zone, three sets of drawings are required. It is understood and agreed by the undersigned owner or agent that the approval of this application does not constitute a privilege to violate the building codes, zoning ordinance, or other ordinances of Chatham County and that any omission of or misrepresentation of fact with or without intention of the undersigned or any alteration from this application (including changing subcontractors) without the approval of the Building Official shall constitute sufficient ground for the revocation of any permit issued which was based on the approval of this application. The owner is listed above will be held responsible for insuring that all permits have been obtained and that all required inspections have been made. The owner my request a Certificate of Occupancy or Certificate of Completion when all required inspections have been approved.			Fax No. (
*IF SUBCONTRACTORS WILL BE USED - COMPLETE CHATHAM COUNTY SUBCONTRACTOR LIST FORM *IF HOMEOWNER IS DOING THE WORK - COMPLETE HOMEOWNER AFFIDAVIT FORM Cost Building \$ HVAC \$ Plumbing \$ Electrical \$ Total Cost \$ Who will be responsible for calling in inspections? Owner	Local Licens	se #	Jurisdicti	Jurisdiction	
*IF HOMEOWNER IS DOING THE WORK - COMPLETE HOMEOWNER AFFIDAVIT FORM Cost Building \$	State Licen	se #	Expires _	Expires	
Building \$ HVAC \$ HVAC \$ HOW IN Total Cost \$					
Who will be responsible for calling in inspections? Owner	Cost				
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()wner/Agent Date	not constitute County and or any alte Building Of on the appropermits have legally liably request a County	ute a privilege to violate I that any omission of or ration from this applicational shall constitute sufferoval of this application. We been obtained and the for any violations which certificate of Occupancy	the building codes, zoning ord misrepresentation of fact with tion (including changing subcoficient ground for the revocation. The owner is listed above will nat all required inspections have the may occur with or without	inance, or other ordinances of Chatham or without intention of the undersigned intractors) without the approval of the in of any permit issued which was based be held responsible for insuring that all we been made. The owner will be held his or her knowledge. The owner may	



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CHATHAM COUNTY SUBCONTRACTOR LIST

Job Location	
Owner's Name	
General Contractor	
PLUMBING	Date
I hereby certify that I will perform	the plumbing work for the project described above and I
further certify that I have a valid S	tate and Local Business Tax Certification (license).
Local Business License #	Jurisdiction
	Expires:
Company Name	
Signature	Phone No. ()
further certify that I have a valid Si Local Business License # State License # Company Name	Date the electrical work for the project described above and I tate and Local Business Tax Certification (license) Jurisdiction Expires:
Signature	Phone No. ()
further certify that I have a valid Si Local Business License # State License # Company Name	
Signature	Phone No. () -



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HOMEOWNER AFFIDAVIT

Date:	
Name:	
Address of Project:	
Permit #:	
Telephone No.: (
To Whom It May Concern:	
I do hereby certify that I am the owner of the above reperform the detailed work on the attached application. will be, when the construction is complete) residing at t	This is a single-family dwelling and I am now (or
I understand it is a violation of State law for me to hire a me in this task. I understand that any violations of this voided and legal action may be taken against me which	agreement will be just cause for the permit to be
Signature of Owner:	
NOTARY: Subscribed to and sworn before me this day of	·, 20
Notary Public	-
Notary Public	
My commission expires:	_
SEAL	



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TEMPORARY ELECTRICAL SERVICE AFFIDAVIT

Project Name:	
Address:	
Owner Name:	
Permit Number:	
This letter is to confirm the understanding of the requirement of the Georgia State Minimum Confirmation (Confirmation).	
the construction process and the testing of equ	electrical power is intended for the completion or uipment installed within the structure. Electrica only. Temporary service will be automatically
	that the issuance of temporary power DOES NOT Certificate of Occupancy must be issued prior to
	ole for any violations to this policy. A violation of tham County Ordinance and may result in the
OWNER:	DATE:
CONTRACTOR:	DATE:



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All Developers, Consultants, Contractors, and Property Owners

Fees

A non-refundable plan review fee of \$2.00 per thousand dollars of the construction value shall be collected at the time of application. The plan review fee is deducted from the permit fee so there is no increase in the total expense of the permit. Commercial permit fees are assessed at \$6.00 per thousand dollars of construction value based on the greater of \$100/sq. ft. and the submitted value.

Permit Posting

The permit holder or agent shall post the permit on a piece of plywood attached to a two by member, at least three feet above grade and visible from the right-of-way. The permit must be protected and the readability maintained throughout the duration of the project. The permit must be posted from commencement of the work until the Final Inspections have been completed and passed. Failure to post and maintain the permit will result in the schedule inspection being automatically failed and a \$30.00 re-inspected fee assessed at that time. A re-inspection request would be required for the next available day, after the fee is paid. This action is taken in compliance with the Administrative Section of the International Code and State Residential Construction Code.