#### **BUILDING DEPARTMENT**



80 Main St. – Senoia, GA 30276 APPLY ONLINE : <u>www.senoia.com</u>

Main: (770) 599-3679 Inspections: (770) 474-9393 Inspection Request: tyroneoffice@safebuilt.com

Website: www.senoia.com

## **APPLICATION SUBMITTAL REQUIREMENTS**

Paper plans will NOT be accepted. All plans and documentation must be provided in PDF format.

Please make sure you submit all the required documents with your application:

- · Scope of Work can be attached if more space is needed
- · Site plan with distances to each property line and/or easement labeled
- · Deck framing detail for all decks
- Swimming pool plans, including site plans and equipment locations. Distance from all property lines shall be labeled.
- · Foundation plan, if applicable
- · Accessibility plan, if applicable
- Life Safety Plan for non-residential construction
- · Floor plan, if applicable
- Signed and sealed architectural plans\*, if applicable, with a code summary
- MEP plans, signed and sealed, if applicable
- COMcheck or REScheck energy compliance worksheets, if applicable
- Building elevations for all non-residential construction, or when required by Planning Dept.
- · Typical wall sections, if applicable

\*Per O.C.G.A. 43-4-4(b)(30, new or existing assembly occupancies, educational, health care, correctional or detention facilities, hotels, dormitories or lodging facilities, multifamily housing and care facilities require the plans to be prepared by a State of Georgia licensed architect. These drawings shall bear the seal and signature of the architect of record.

A complete application is required at the time of submittal. Missing required documentation will result in failed reviews and resubmittal fees.

Certain applications require photocopies of contractor license, registered agent documents, WASA tap receipts, WASA grease tap plan approvals, Water Department receipts, Health Department approvals for construction, or other documentations. If you have questions about what is required for your permit type, please review the Building Department website at <a href="https://www.senoia.com/building/page/building-and-zoning-forms">https://www.senoia.com/building/page/building-and-zoning-forms</a> and select your permit type.

### Plan Review Check List for Commercial Buildings

<del></del>	Yes	No	N/A
Architectural/Structural Plans			
Stamped and Signed			
Are plans in scale drawing?			
Square Footage			
Occupancy Classification			
Meets Life Safety Code 2018 Edition			
Meets National Fire Code 2018 Edition			
Meets International Building Code 2018			
State Fire Marshal Rules and Regulations			
Occupant Load			
Fire Safety Plan			
Means of Egress			
Plan Meet ALL ADA Requirements			
Egress Capacity			
Common Path of Travel Distance			
Dead End Travel Distance			
Travel Distance			
Exit/Emergency Lights			
Direction of Door Swing			
Exit Separation			
Panic Hardware			
Exit Discharge Acceptable			
Construction Classification			
Fire Resistance Rating			
Fire Walls/Occupancy Seperation			
Hazardous Areas Seperation Door/Dampers in Fire Rated Assemblies			
Interior Finishes			
Portable Fire Extingushers			
Smoke Barriers			
Allowable Area and Height			
stairs Accepatable/Inside and Out			
Hand Rails/Guardrails			
Adequate Headroom			
Ramps Meet ADA			
Site Plan			
Available Fire Flow			
Fire Protection Systems			
Public Street Width			
On Site Street/Fire Lane Width			
Overhead Clearance			
Turing Radii			
Dead End Lenghts			
Turn Around			
Access Grades			
Bridge/Culverts Access			
Gate Access			
Maximum Distance between Building and Access Roads			
Number of Hydrants			
Hydrants(s) Spacing			
Distance of Hydrant(s) to Building			
Distance of Hydrant(s) to Fire Department Connection			
Sprinklers Parts of Submission			
Alarm System Part of Submission			
Underground Storage Tanks Part of Submission			
MEP's Included in Submittal			
Fire Protection Details Cabling/Piping			
Measure the Building in Blue Beam			
Have the Plan been Approved in Sages?			
Commercial Roof (upload photos of bare wood & felt)			
FOG application			
FOG Appendices			
State Care Mechanical & Builder			
Occupational Tay Certificate Mechanical & Builder		1	

<sup>\*\*\*\*</sup> NOTE: Finish Floor Elevation certificates are required on any habitable structure build on a lot of record that includes or abuts any portion of flood plain \*\*\*\*

Occupational Tax Certificate Mechanical & Builder



# BUILDING PERMIT APPLICATION 770-599-3679

Permit No.

Type of Work:	☐ Residential ☐ Co	ommercial Replace	App	Application Date			Estimated Value of Work (Labor and Materials): \$		
Construction	Type: IA □ IB □ IIA □			IIIB 🗆	IVA □	IV	B 🗆 VA 🗆 VB		
Occupancy:	A1			E □ R1 □	F1 □ R2 □	F2 R3	□ H1 □ H2 [		H4 □ U □
Square foot	of permitted area:								
Applicant	Applicant Name:								
PROJEC'	ΓINFORMATION	•							
Job Site A				Subdivision: Lot Number:					
Property C	Owner Information:								
1 ,	Name					Ph	one#		
Address				City			State	Zip Co	de
Scope of Work:									
Scope of work includes: Electrical   Plumbing   Mechanical									
	CTOR INFORMATION	•	1						
Business Name: State Certification Number:									
Street Add	ress City	State	e	Zip (	Code		Phone		
Occupational Tax Number: City/County held:									
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.									
Signature of Contractor & (State Certification number)  Date									
Print name of Contractor email address									
FOR OFFICE USE ONLY  Adjusted Construction Cost per ICC building valuation Data: \$									
Building Per	Building Permit Fee Fee: \$ Plan Review Fee:			\$			CO/CC Fee: \$		
Electrical Permit Fee: \$ Plumbing Permit			nit Fee	ee: \$ Mechanica			Mechanical Permit	hanical Permit Fee: \$	
Water Tap F	ee: \$	Sewer Tap Fee: \$					Impact Fee: \$		
Water Capital Recovery Fee: \$   Zoning Approved By									
Total Fee:									



CITY OF SENOIA BUILDING DEPARTMENT P. O. BOX 310 SENOIA, GA 30276 (770) 599-3679 (770) 599-0855 fax

## SUBCONTRACTOR AFFIDAVIT

(This form is to be used when a subcontractor is not the one pulling the permit.)

This form must be completed, signed, notarized, and submitted to the Building Department prior to any inspections associated with electrical, plumbing, and/or mechanical work.

Subdivision		Lot	_Address	
Builder			_Email	
THIS IS TO CERTIF USING FOR THIS JO		THE STAT	E LICENSI	E CHECKED BELOW AND AM
PLUMBING	ELECTRICAL_		_MECHANI	CAL
COMPANY NAME				PHONE #
COMPANY ADDRES	S			
STATE LICENSE #		BUS.T.	AX/OCCUPA	ATION CTF.#
	ESPONSIBLE FO	R THIS JO	B UNTIL TI	E ABOVE JOB, I UNDERSTAND HE BUILDING DEPARTMENT
PRINT NAME		SIC	NATURE	
Sworn to and subscribe	ed before me this	day	of	, 20
				NOTARY PUBLIC, STATE OF GEORGIA



# TRADE PERMIT APPLICATION 770-599-3679

Permit No.

Type of	□ Residen		nmercial	Application Date		e of Work (Labor
Work:	□ New	□ Repair □ R	eplace	//	and Materials): \$	
Electrical □ Plumbing □					Mecl	nanical
PROJEC	T INFORM	IATION				
PROJECT INFORMATION  Job Site Address: Subdivis						
					Lot Number:	
Property (	Owner Inform	mation:				
Troperty	Willer Illion	Name			Phone #	
<u> </u>						
Address				City	State	Zip Code
Scope of V	Work:					
		FORMATION		State Contifee	-4: Nī1	
Business 1	Name:			State Certifica	ation Number:	
	•		~			
Street Add		City	State	•	Phone	
Occupatio	Occupational Tax Number: City/County held:					
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.						
Signature of Contractor & (State Certification number)  Date						Date
Print name of Contractor				email address		
FOR OFFICE						
Permit Fee:	\$					