

Commercial Move In As Is Permit Guide

Three Step Process to Complete Your Move in as is

This permit is for businesses moving into an existing space and making only cosmetic changes, such as painting or cleaning



What to Know Before You Apply

- Are you making any structural changes?** If you make changes to the structure, you will need an Alteration Building Permit. No structural changes may be considered *Move in as is*
- Is your type of business different from the previous tenant?** If you are moving into an existing space that previously contained a different type of business or occupant, you will not be considered *Move in as is*
- How long has the space been vacant?** A *Move in as is* permit is only applicable to spaces vacant for less than 6 months

STEP ONE – APPLICATION SUBMITTAL

Submit required documents and pay all necessary fees to DeKalb Development Services, located on the 2nd floor at 330 West Ponce de Leon Ave, Decatur, GA 30030

Required Documents

- Building Permit Application:** Complete every section that pertains to you
- Spaces greater than 3,000 square feet, but less than 5,000 square feet**
- Scaled Floor Plan:** Submit THREE COPIES of your Floor Plan and Key Plan consistent with the Commercial Plans Submittal Checklist for *Move in as is*
- Spaces less than or equal to 3,000 square feet**
- Move In As Is Affidavit:** This notarized affidavit affirms that the space is less than or equal to 3,000 square feet, that you have made only cosmetic changes to the space, like painting or cleaning, and that the proposed use is substantially similar to the prior use and propose use as business or mercantile establishment. If a staff review finds all of this to be correct, and there is a prior Certificate of Occupancy on file, the affidavit will be accepted in lieu of plans. A Life Safety and Accessibility Code inspection will be required to obtain a Certificate of Occupancy

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Spaces of any size

- Change of Ownership/Change of Business Name Certification:** Submit a notarized copy of the Change of Ownership/Change of Business Name Certification form affirming that the only changes to the business will be the ownership and/or the business name. In addition, the applicant must affirm that the same type of business will be conducted under the new ownership or business name. A Life Safety and Accessibility Code inspection will be required to obtain a Certificate of Occupancy

Payment of Fees (all fees are due upon application submittal)

- Base Permit Fee, \$425.00:** The base permit fee includes a structural plan review, a life safety code review, a life safety code inspection, and a Certificate of Occupancy

Fee Type	Fee Amount
Base Fee	\$425.00
Technology Fee	\$20.00
Total	\$445.00

- Fire Marshal Fees:** Additional fees may apply if an Alarm System Review, Automatic Sprinkler System Review, or a Hood Suppression System Review is required. Re-inspections and plan resubmissions will incur additional fees
- DeKalb County accepts Visa, MasterCard, checks, money orders, and cashier’s check. The County does not accept American Express or counter checks (checks without your name printed on it). **Make checks payable to “DeKalb County”**

STEP TWO – REVIEW AND APPROVAL

- Zoning Review:** Zoning Officers will review your plans to ensure consistency with the Zoning Code
- Life Safety Code Review:** All plans will be reviewed to verify conformity with Life Safety Code
- Zoning Review follow-up:** The plan review staff will inform you if there are redline comments (corrections) or next steps
- Permit Approval:** When your permit is **APPROVED** return to DeKalb Development Services, located on the 2nd floor, to pick up your permit. If your plans are **NOT APPROVED**, pick up redlined plans with required corrections. Make corrections and resubmit two new plans, plus redlined plans, to DeKalb Development Services

STEP THREE – INSPECTIONS AND CO

- POST YOUR PERMIT** in a box, on-site and visible. If your permit or approved plan is not posted in the box, your inspection will not proceed. If you deviate from your original plans, you must apply for a Permit Revision, which requires new plan sets, fees, and repeating the process described above
- Fire Inspection:** Once you receive your permit, call 404-371-3010 to schedule your Fire Inspection
- Certificate of Occupancy (CO):** Once you pass your fire inspection, you may obtain your CO from DeKalb Development Services

Thank you for investing in DeKalb County

Chief Executive Officer
Michael Thurmond

DEPARTMENT OF PLANNING & SUSTAINABILITY

Director
Andrew A. Baker, AICP

BUILDING PERMIT APPLICATION

Date: _____

Shaded area for office use Building Permit Number	Check Applicable Type:
	<input type="checkbox"/> Non-Residential <input type="checkbox"/> Residential <input type="checkbox"/> Apartment <input type="checkbox"/> Condo Stack Flats <input type="checkbox"/> Condo Townhouse <input type="checkbox"/> Townhouse Fee Simple

PROJECT NAME / TENANT NAME / SUBDIVISION NAME	LDP NUMBER	NUMBER OF UNITS
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PROJECT ADDRESS			City	State	Zip
Building #	Floor #	Apt #	Suite #	Lot #	

PROPERTY OWNER'S NAME		
Address		
Phone	Mobile	Fax
Email		

APPLICANT	<input type="checkbox"/> Property Owner	<input type="checkbox"/> Tenant Leasing Commercial Space	<input type="checkbox"/> Contractor	<input type="checkbox"/> Authorized Agent	<input type="checkbox"/> Architect/Engineer
Applicant's Name					
Company Name					
Address					
Phone	Mobile	Fax			
Email					

CONTRACTOR	<input type="checkbox"/> Property Owner	<input type="checkbox"/> To Be Determined	<input type="checkbox"/> State of Ga Licensed Contractor	<input type="checkbox"/> Specialty Contractor
Contractor's Name				
Company Name				
Address				
Phone	Mobile	Fax		
Email	Business License Number			
Individual / Authorized Agent's State License #			Company's State License #	

Type of Work: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Fire Damage <input type="checkbox"/> Demo <input type="checkbox"/> Exterior Work <input type="checkbox"/> Driveway <input type="checkbox"/> Other	Estimated Cost \$
Please provide a full description of work: 	
Construction Type: <input type="checkbox"/> IA <input type="checkbox"/> IIA <input type="checkbox"/> IIIA <input type="checkbox"/> IB <input type="checkbox"/> IIB <input type="checkbox"/> IIIB <input type="checkbox"/> IV <input type="checkbox"/> VA <input type="checkbox"/> VB	
Occupancy Classification:	

Total Square Footage Include only areas pertaining to this scope of work. This should be a combined total of all of the items below (if applicable). _____			
Finished Floor Area Primary Structure _____ Finished Basement _____	Unfinished Area Attic _____ Basement _____	Garage _____ Detached garages require separate permits	Outdoor Areas Deck _____ Porch _____ Patio _____

Indicate additional permits required to complete this job <input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical / Low Voltage <input type="checkbox"/> Plumbing <input type="checkbox"/> Other <input type="checkbox"/> None	Is there a sprinkler system? <input type="checkbox"/> Yes <input type="checkbox"/> No	Sanitary Facilities <input type="checkbox"/> Septic <input type="checkbox"/> Sewer	Elevators <input type="checkbox"/> Yes <input type="checkbox"/> No
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# of Stories	# Total Rooms	# Bathrooms/Restrooms	# Kitchens	# Bedrooms
Exterior Finish Materials		Roofing Materials		

Setbacks: Front _____ Rear _____ Left _____ Right _____	Impervious Area (Square Feet) _____	Lot Size: _____ Easement: <input type="checkbox"/> Yes <input type="checkbox"/> No
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THIS SECTION IS FOR NON RESIDENTIAL APPLICANTS ONLY

ADULT ENTERTAINMENT ESTABLISHMENT means a business or establishment where persons, employees, or patrons appear nude or in such attire, costume or clothing as to expose specified anatomical areas or engage in specified sexual activities, including, but not limited to, adult bookstores, adult businesses, adult motion picture theaters; adult mini-motion picture theaters, adult motion picture arcades; adult video stores, erotic entertainment/dance establishments; escort bureaus, introduction services. "Adult entertainment establishment" shall not include a traditional or mainstream establishment, which means a theater, movie theater, concert hall, museum, educational institution, or similar establishment which regularly features live or other performances or showing which are not distinguished or characterized by an emphasis on the depiction, display, or description or featuring is incidental to the primary purpose of any performance.

Is this business an adult establishment as defined above by the DeKalb County Code, or does it offer any form of adult entertainment?
 Yes No

****Note: Only the Property Owner, Architect, Engineer, or General Contractor should sign this application. EXCEPTION: If a tenant is apply to move into a commercial space, the tenant may sign. Authorized Agents may also sign, when an Authorized Permit Agent Form is completed on behalf of a State of Georgia licensed contractor. Before signing, please carefully read the statements below.**

I, _____, do solemnly swear that the information on this application is true, and that no false or misleading
Print Name

statement is submitted herein to obtain a Building Permit or Certificate of Occupancy. I understand that if I provide false or misleading information in this application I may be subject to criminal prosecution and/or immediate revocation of any Building Permit or Certificate of Occupancy issued as a result of this application. I understand that I must comply with all County ordinances and regulations. I hereby agree to provide any clearance(s) and/or inspection report(s) required prior to the issuance of a Permit or Certificate of Occupancy.

I further agree that I shall be responsible from the date of this permit, or from the time of the beginning of the first work, whichever shall be earlier, for all injury or damage of any kind resulting from this work, whether from basic services or additional services, to persons or property. I agree to exonerate, indemnify and save harmless the County from and against all claims or actions, and all expenses incidental to the defense of any such claims, litigation, and actions, based upon or arising out of damage or injury (including death) to persons or property caused by or sustained in connection with any work performed under the Building Permit issued as a result of this application.

Signature _____

Total Minimum Fees \$245 (\$175 Minimum Permit Fee; \$20 Technology Fee; \$50 Certificate of Occupancy or Certificate of Completion). Some commercial projects require Fire Review & Inspection Fees (\$100 Fire Life Safety Review; \$100 Fire Site Review; \$100 Fire Inspection). Please note that additional fees may apply depending on the type of permit being submitted. Please contact us at (404) 371-4915 for the calculation of fees or refer to our fee schedule located at www.planningdekalb.net.

Move In As Is Affidavit

**Applicant Proposing the Following
(Select One of the Options Below)**

This form is applicable for tenant spaces 3,000 Sq. Ft or less
(Business or Mercantile uses ONLY)

- Change in Ownership without Renovation (Name Change)
 - The business is changing ownership to a new owner without any renovations to the interior or exterior of the property including any changes to finishes. The business and use stay the same.
- Change in Ownership with Changes to Finish Only
 - The business is changing owners and changes to only the finishes are required. The business and use stay the same.
- Change in Occupant with Changes to Finish Only or No Changes
 - The property is changing from one business to another. The new business is similar to the use to that previously approved for the property or structure. Any changes to the space are limited to finishes only. A change in use will only be permitted under this affidavit where the new use is similar to the use of the previously approved tenant, as determined by a review conducted by the staff from the Department of Planning and Sustainability and the DeKalb Fire Rescue Department.

Applicant Information

Name _____ Address _____
City _____ State _____ Zip Code _____
Phone Number _____ Email _____

Parcel/Business Information

Business Name _____
Address _____ Suite # _____
City _____ State _____ Zip Code _____
Tenant Square Footage _____ Occupancy Classification _____ Sprinklered Y / N _____ Fire Alarm Y / N _____

Describe Business:

OPTIONAL INFORMATION – PROVIDE IF KNOWN

Previous Business Name _____
Parcel Number _____
Building Square Footage _____ Building Construction Type _____ Occupant Load _____

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Owner/Applicant Affirmation

I hereby affirm that I am either the owner or legal lessee of the aforementioned business property and that I will be occupying an existing commercial development with the same use or similar use as determined by DeKalb County Department of Planning & Sustainability. The existing tenant space is 3,000 square feet or less and the proposed use is Business or Mercantile. I have made no changes in any way (i.e., any gas, mechanical, plumbing and/or electrical work, load bearing, non-load bearing walls, exits, etc.) apart from paint or other finishes. I understand that if I wish to make changes or change the type of business, I must submit plans to the DeKalb County Department of Planning & Sustainability under a separate permit application.

I understand that a life safety inspection will be conducted of my business. The inspector may discover life safety violations that will need to be corrected and re-inspected prior to any certificate of occupancy being issued. I also understand that the inspector may find violations such that I will be required to submit plans and obtain an additional permit to correct the violations. If it is determined that the actual use is not consistent with the information provided, this application shall be considered null and void.

I hereby affirm that the information provided is true and accurate. I hereby affirm that approval of this application does not constitute approval for any other permit that may be required by the county or other agency having jurisdiction.

Signature of Tenant/Owner

Printed Name of Tenant/Owner

Sworn to and subscribed before me this _____ day of _____, 20 _____

Signature and Seal of Notary Public

My Commission Expires

Official Use

Zoning _____ Construction Type _____ Occupant Load _____

Comments _____

APPROVALS

Change of OWNERSHIP Certification Change of BUSINESS NAME Certification

Please fill out both pages of form COMPLETELY then sign before a notary.
This form, if applicable, can be used in lieu of building plan submittal for most occupancy classifications.

Existing Business Name _____

New Business Name _____

Existing Business Owner Name(s) _____ Telephone _____

New Business Owner Name(s) _____ Telephone _____

Type of Business / Business Activities _____

Address _____ Suite # _____ City _____ Zip Code _____

I, *(Print New Business Owner's Name/Names)* _____
am proposing the following changes to the above-listed location:

(Select only one)

- A change in the ownership of the business only
- A change in the name of the business only
- A change in the ownership plus a change in the name of the business

I also acknowledge that the following items are all required for approval:

(Initial before each statement)

_____ **I have made no changes in any way** (i.e. no changes to finishes, paint, floor nor any modifications or repairs including mechanical, gas, plumbing and/or electrical work, load bearing walls, non-load bearing walls, exits, occupancy classification, occupant load, etc.) to the above-listed space. I also affirm that **I will be conducting the same type of business** as is currently being conducted at the above-listed location.

_____ *I understand that a valid Certificate of Occupancy and associated documents must be on file with DeKalb County for this business at the above-listed location. Restaurants and bars will require that the Letter of Entertainment, the DeKalb County Board of Health Compliance Checklist, and the Fats, Oils, and Grease (F.O.G.) documentation be revised/resubmitted to reflect these changes.*

_____ *I understand that a current and valid Business License must be on file with DeKalb County for this business at the above-listed location.*

Please complete page 2

Change of OWNERSHIP Certification
Change of BUSINESS NAME Certification

Continued from Page 1

(Initial before each statement)

_____ I understand that my business must be in compliance with all current zoning regulations as determined by DeKalb County.

_____ I understand that a life safety inspection will be conducted of my business. The inspector may discover life safety violations that will need to be corrected in a timely manner. I also understand that the inspector may discover life safety violations such that I will be required to submit plans and obtain a permit to correct the violations. After the completion of an approved life safety inspection, I will proceed to the permit office to obtain a Certificate of Occupancy.

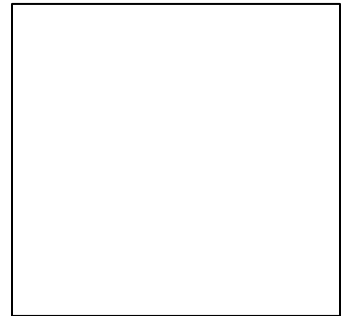
_____ I understand that after I receive my new Certificate of Occupancy I will need to proceed to the Business License department to obtain a revised or new Business License.

I, (Owner's Signature) _____
attest that, to the best of my knowledge, all of the above information is true.

Sworn to and subscribed before me this _____ day of _____, 20_____.

Signature of Notary Public

My Commission Expires



Notary Seal

The portion below to be filled out by DeKalb County Plans Examiners

<i>Building Development Administration</i>
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<i>Fire Marshal Office</i>

Comments

BUILDING AND FIRE COMMERCIAL PLANS SUBMITTAL CHECKLIST

For construction of new buildings, additions, alterations, and repairs of existing and as-built floor plans involving structural changes, occupancy changes, impact upon egress, and impact on fire-resistive construction, or work equal to or greater than \$3000, submit three (3) sets of plans in person to:

DeKalb County Department of Planning and Sustainability Plans Review Division, 2nd floor
330 W. Ponce de Leon Avenue Atlanta, GA 30030

Plans submitted must provide clear and sufficient information applicable to the requirements of the project in order for the plans examiner to conduct a complete review. Plans shall conform with the requirements in this checklist that pertain to the design or as-built condition of the project or space. All plan sets must include a cover sheet, floor plans, life safety plan, site plan, and key plan. Listed below are the items required for commercial plan review.

DRAWING SCALE

- A. All plans shall be drawn to an indicated scale (1/8" or 1/4" = 1' preferred) on sheets of suitable and uniform size (minimum 11" x 17").

COVER SHEET

- A. Name of commercial tenant
B. Project address (include building and suite number)
C. Scope of Work Narrative
D. State of Georgia Registered Architect/Engineer/Design Professional Signed, Sealed and Dated Stamp with registration number on all sheets (see requirements in the Registered Architect/Engineer section below), O.C.G.A. Title 43
E. Occupancy Classification per NFPA 101 Life Safety Code (LSC), Chapter 6
F. Occupancy Classification per International Building Code (IBC), Chapter 3
G. Occupancy Fire-Rated Separation, including rated design assemblies used for structural fire resistance and fire-resistance rated construction separation of adjacent spaces
H. Type of Construction
I. If an automatic sprinkler system is provided, and whether the sprinkler system is required
J. Allowable Building Area and Height, Proposed Building Area and Height, and actual building area and height, IBC Chapter 5
K. Calculations for Area Modifications, if applicable, IBC Chapter 5
L. Occupant Load Calculations per Life Safety Code: Occupancy, Total Occupant Load, include calculations, NFPA 101 Chapter 7
M. Plumbing Fixture Requirements, Proposed Plumbing Fixture Count, IBC Chapter 29, IPC Chapter 4, including calculations
N. List the following codes and editions:
- International Building Code (IBC)- 2012 edition with Georgia Amendments
 - National Electric Code (NEC) - 2014 edition
 - International Fuel Gas Code (IFGC) - 2012 edition with Georgia Amendments
 - International Mechanical Code (IMC) - 2012 edition with Georgia Amendments
 - International Plumbing Code (IPC) - 2012 edition with Georgia Amendments
 - International Energy Conservation Code (IECC) - 2009 edition with Georgia Amendments
 - International Residential Code (IRC) - 2012 edition with Georgia Amendments
 - International Fire Code (IFC) - 2012 edition with Georgia Fire Marshal Amendments
 - Georgia Accessibility Code - GAC 120-3-20 - 1997 edition
 - National Fire Protection Association 101 Life Safety Code (LSC) - 2012 Edition

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- U.S. Department of Justice A.D.A. Standards for Accessible Design (ADA) - 2010 edition
- Chapter 120-3-3 Rules and Regulations for the State Minimum Fire Standards in Georgia

MEP PLANS

- A. Mechanical, Electrical, and/or Plumbing Plans may be required depending on the scope of work.

KEY PLAN

- A. Show proposed space within a building
B. Show adjoining tenants and identify them by occupancy
C. Show and identify complete outline of area within the scope of work

SITE PLAN

- A. Location of project in relation to property lines
B. Location of project in relation to other buildings onsite, if applicable
C. Identify parking spaces
D. Show relative elevations and illustrating driveways, fire department access roads, parking, handicap parking, proximity of structure to other structures, distance of structure from other structures, walkways, ramps, stairs, fences, passenger loading zones, location of electric transformer pads, heat and air conditioning units outside of the facility.

BUILDING CODE COMPLIANCE REVIEW

- A. Existing vs. new construction
B. Rated walls
C. Existing walls / demo walls
D. Sections and applicable details
E. Floor/reflected ceiling plans, label and dimension of all spaces
F. Cross sections, wall sections and applicable details
G. Door, window, and finish schedules
H. Structural plans and fastening schedule, if applicable
I. Exits
J. Room use designation
K. Door Sizes, Corridors, Stairs, Plumbing Fixtures, and Storage Rooms
L. Total area of work
M. Use of adjacent spaces

PRE-ENGINEERED COMPONENTS

- A. If pre-engineered building structural components were used, technical specification will be required with additional detail for verification of code compliance.

FIRE & LIFE SAFETY REVIEW

- A. Plan set must include a Life Safety Plan
B. Show all means of egress
C. Construction Type, with specified reference to 2012 IBC and 2012 NFPA 220 (as modified on GAC 120-3-20, NFPA 101 Table 8.2.1.1). Note construction materials and components of the structure on the plans (i.e. load bearing walls, interior walls, columns, etc.).
D. Capacity (as identified by the authorities having jurisdiction, such as the DeKalb County School Board).
E. Dimensions of all bathrooms. New construction MUST COMPLY with GA Accessibility Code, 1997, GAC 120-3-20 requirements and ADA Standards for Accessible Design, 2010 edition. Show clearances, turning circles, elevations all fixtures.
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- F. Indicate class/rating for doors and windows, with UL listing. Indicate door swings, length of halls and corridors, and travel distances to exits.
- G. Location of fire alarm components to include pull stations, horn/strobe units and fire alarm control panel, battery calculations and strobe intensity levels. Fire Alarm Plans MUST be submitted by GEORGIA licensed low-voltage contractor.
- H. Location and power sources for ALL smoke detectors.
- I. Locations of ALL exit signs.
- J. Location of all emergency lighting.
- K. Locations of fire extinguishers (Note size, type and rating).
- L. Location of furnaces and water heaters. If unit is in attic/penthouse, note the location. Note BTU input rating of hot water heaters, and note CFM and BTU of furnace.
- M. Location and type of stove (residential or commercial appliance).
- N. Location of ALL stairs (inside and outside), ramps, and slope of ramps (Ex: 1:12)
- O. Show building cross section with elevation(s) related to grade.
- P. Location and size of laundry room (number, type residential or commercial appliance).
- Q. Note location of storage room, with type/commodity and height of contents. For high- piled combustible storage, plans MUST contain ALL information required in IFC Chapter 32 (3201.3 Construction Documents).
- R. Indicate location of any powered industrial material handling equipment (Ex: LP Gas or Electric powered forklift trucks, inside or outside)
- S. Location of fixed fire protection devices (Ex: kitchen hood suppression or Sprinkler systems). System design must be done and submitted by GEORGIA licensed fire suppression or sprinkler contractor. Fire systems permits for hoods, sprinklers, and alarms require separate permits.

SPECIFICATIONS

Plans shall be accompanied by two copies of specifications

REGISTERED ARCHITECT/ENGINEER

Submit plans with Architect/Engineer/Design Professional seal, as required for all plans that meet any of the following criteria:

- A. Over 5,000 square feet,
- B. Buildings greater than one story, or

- C. All Assembly, Educational, Institutional and Residential occupancies (i.e. Healthcare and Adult and Child Daycare facilities)

All plumbing, mechanical, and electrical plans must be stamped by a design professional. Plans marked "Not for Construction" will NOT be accepted for permit review.

SUBMITTALS

Submit three (3) sets of the plans and any associated calculations along with one copy of the permit application to Plans Review. Incomplete plans/submissions will not be reviewed. You will be notified when the review is complete, approved or disapproved. To expedite the permit process, please be prepared to provide your plan- tracking file number (also called an AP number) via email, call, or in person when requesting information about your project. You can also check the status of your project on our website at dekalbcountyga.gov/permit_status.

ZONING

All plans submitted to Structural Plans Review must also be reviewed for zoning compliance. If plans are for new construction, a Site Development permit must be issued before a building permit is issued.

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FOOD SERVICE INDUSTRY

All food service establishments, (FSEs) where food or beverages are prepared and/or packaged for consumption, on or off site are required to install, operate and maintain a grease interceptor properly sized by a FOG Evaluation. FSEs include: restaurants, carry out, catering businesses, cafeteria, bakery, ice cream/ smoothies establishments, liquor establishments, schools, night clubs and bars, hospitals, clubs/ organizations, churches, hotels, nursing home/assisted living, daycares, grocery stores and business offices with dishwashers.

Change of ownership, Change of name and grease trap replacement requires a FOG evaluation on-site FOG Evaluation Plan Review Requirements for New Constructions and Remodeling:

- A. Large scale utility, floor, mechanicals and plumbing plans with a clear separation between the sewer line and the grease line. All the fresh air fixtures from the food preparation area MUST be directed to the grease line. All the restroom plumbing must be directed to the sewer line. Exterior interceptors must be connected to the FSE's lateral sewer line.
- B. Seating /Serving capacity noted on plans.
- C. Hours of operation per day noted on plans.

For more information call FOG Main Line (404)687-7150 or visit www.dekalbwatershed.com/departments/fog/permit_information.htm

Food Service Establishments also must provide the following:

- A. Kitchen plans must also be reviewed by the DeKalb County Board of Health with copies of the Health Department Checklists attached before a building permit can be issued.
- B. Plans must be accompanied by a DeKalb County Letter of Entertainment form. This document is signed and notarized by the owner of the building and by the tenant. It identifies the hours of operation, it identifies whether alcoholic beverages will be served, and it identifies whether entertainment will be provided and what types of entertainment.

ADDRESSING

All projects must have a unique address/suite assigned in DeKalb's Geographic Information Systems database for each business. For more information, contact the Department of GIS at 404- 371-2257

STATE FIRE MARSHAL

All plans for hospitals, detention facilities, state owned/operated/occupied facilities, and any building constituting a special hazard per O.C.G.A §25-2-13 must be approved by the Georgia State Safety Fire Commissioners Office prior to submittal of those plans to DeKalb County. To contact the State Fire Marshal, call 404-656-2064.

CONTRACTOR LICENSE

A State General Contractor license is required to obtain building permit. In addition, a State Trade license is required for all trade permits. (Electrical, HVAC, Plumbing, Low voltage, Sprinkler, Fire suppression hoods and systems, and Fire alarm systems)

FEES

Building permits fees for alterations, general repairs, demolition and interior tenant finish are based on \$6.50 per thousand of construction cost, plus \$50.00 for Certificate of Occupancy (CO) and \$20.00 for Technology Fee. For new construction and additions, the fees are calculated using the ICC Building Valuation Data, August 2014 Edition, plus the \$50.00 CO and \$20.00 Technology Fees, and fire fees. The minimum fee for any commercial project is \$445. These fees are due at time of plan submission.

ADDITIONAL RESOURCES

DEPARTMENT OF PLANNING & SUSTAINABILITY

To access all required forms, additional checklists, and permit guides that explain the building permit process and related requirements, go to PlanningDeKalb.net/forms.

Revised 1/19/2017
