

Chief Executive Officer

Michael Thurmond

## **DEPARTMENT OF PLANNING & SUSTAINABILITY**

Director

Andrew A. Baker, AICP

## **BUILDING PERMIT APPLICATION**

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Date:		

Shaded area for office use Building Permit Number	Check Applicable Type: □ Non-Residential □ Residential □ Apartment □ Condo Stack Flats □ Condo Townhouse □ Townhouse Fee Simple				
PROJECT NAME / TENANT NAME / SUBDIVISION NAME		LDP NUMBER			NUMBER OF UNITS
PROJECT ADDRESS		City		State	Zip
Building # Floor	4	Apt #	Suite #		Lot #
	+ r	<b>ւ</b> րլ #	Suite #		
PROPERTY OWNER'S NAME					
Address					
Phone	Mobile		Fa		
FILONE	MODIle		Га	IX.	
Email					
APPLICANT   Property Owner   Tenar	t Leasing Commerc	ial Space 🛛 🗆 Cor	tractor	Authorized Age	ent Architect/Engineer
Applicant's Name					
Company Name					
Address					
Phone	Mobile		Fa		
Phone	MODIle		Γč	IX	
Email					
CONTRACTOR	Be Determined	□ State of Ga Li	censed Contra	actor 🛛	Specialty Contractor
Contractor's Name					
Contractor's Name Company Name					
Company Name					
Company Name	Mobile		Fa	IX	
Company Name Address Phone	Mobile				
Company Name Address	Mobile			ux sense Number	
Company Name Address Phone	Mobile		Business Lic		

<b>Type of Work:</b> □ New □ Addition □ Alt	eration [	Renair 🗌 Fire Damag	e 🗌 Demo	🗌 Exterior Work 🗆 D	riveway 🗆 Ot	her	Estimate	d Cost \$	
Please provide a full descr		1							
<b>Construction Type:</b> DIA				V 🗆 VA 🗆 VB	Occupancy Cl	assificat	tion:		
Total Square Footage									
include only areas pertaining	g to this sco	ppe of work. This should	l be a combin	ed total of all of the ite	ems below (if a	pplicable	e)		
Finished Floor Area Primary Structure		Unfinished Area Attic		Garage			Outdoor Areas Deck		
Finished Basement Basement				Detached garages rea	nuiro conarato		Porch Patio		
misicu basement				Detached garages require separate permits					
Indicate additional permits required to complete this job  Mechanical  Electrical / Low Voltage  Plumbing  Other  No							ary Facilities Elevators		-
,		0 0		□ Yes □ No			c 🗆 Sewer	□Yes	□No
# of Stories	# Total F	Rooms	# Bathro	oms/Restrooms	# Kitchens		# Bedro	oms	
Exterior Finish Materials				Roofing Materials	<u> </u>				
Setbacks:			Impervi	ous Area			Lot Size:		
Front Rear	Loft	Right		(Square Feet)			Easement:		No
	Lent	Mgnt					Easement.		NU
		THIS SECTION I	S FOR NON	RESIDENTIAL APPL	LICANTS ONL	Y.			
ADULT ENTERTAINMENT costume or clothing as to ex									
businesses, adult motion pic establishments; escort burea	ture theate	ers; adult mini-motion p	icture theater	s, adult motion pictur	e arcades; adu	ult video s	stores, erotic er	ntertainmen	t/dance
which means a theater, mov	vie theater,	concert hall, museum,	educational	institution, or similar e	stablishment v	which reg	gularly features	live or othe	r
performances or showing w the primary purpose of any p			acterized by a	an emphasis on the d	epiction, displa	ay, or des	scription or feat	uring is inci	dental to
ls this business an adult esta	ablishment	as defined above by th	ne DeKalb Co	ounty Code, or does it	offer any form	of adult	entertainment?	)	
□ Yes □No									
**Note: Only the Proper apply to move into a co is completed on behalf	mmercial	space, the tenant may	y sign. Auth	orized Agents may	also sign, wh	en an A	uthorized Perr	nit Agent F	
I.		-		ar that the information	2				sleading
Print	Name			Occupancy. Junders					

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** (\$195 Minimum Permit 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) 371-2155 for the calculation of fees or refer to our fee schedule located at www.dekalbcountyga.gov/planning-and-sustainability/planning-sustainability