THIS IS NOT A PERMIT

APPLICATION FOR BUILDING PERMIT

Jackson County Protective Inspection Division
67 Athens Street, Jefferson, GA 30549

Phone: 706/367-6335 **Fax: 706/367-2578**

Fill out the following information and turn in with all supplemental items requested by the Public Development Department. Any application that is found to be incomplete **will not be** issued a permit.

Property Owner's Name: _____ Phone: _____
Construction Site 911 Address: _____
Subdivision: _____ Lot # _____
Map and Parcel #: _____ Acreage of Site or Individual Lot: _____

WORK MUST COMMENCE WITHIN 6 MONTHS OF ISSUANCE AND NOT BE ABANDONED IN EXCESS OF 6 MONTHS OR PERMIT WILL BECOME VOID.

Foundation _____ # of Stories _____ Estimated retail value (excluding land) _____
Basement _____ Garage: Attached _____ Detached _____ Commercial _____
Exterior finish: _____ Heated square footage: _____ Unheated square footage: _____
Description & purpose: _____

General contractor: _____
Address: _____
Phone: _____ State License #: _____ Business License #: _____
Provide copies of state license, business license and blue card.
Driveway Permit #: _____(Attach copy of permit) Septic System Permit: # _____ (Attach copy of permit)
Are there any other structures on the property? YES _____ NO _____
Are there any F.E.M.A. Flood Hazard Zones on or adjacent to the property or project sites? YES _____ NO _____
Is the project site or the area of proposed Land Disturbing Activity within 200 feet of State Waters (k.e. perennial or intermittent streams, lakes, or wetlands)? YES _____ NO _____
If yes to any of the questions, then a detailed site plan and an explanation are required. _____

SOIL EROSION AND SEDIMENTATION CONTROL:

All land disturbing activities in Jackson County are required to comply with "Best Management Practices" for soil erosion and sedimentation control.
24-hour local contact responsible for erosion and sedimentation control:
Name: _____ Blue Card #: (Level 1A) _____
Address: _____

Phone: _____

THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND THE PROPOSED WORK MEETS ALL CODES AND ORDINANCES OF JACKSON COUNTY.

Notice: No changes shall be made from that which is stated in this application, or in attached plans and specifications, except by submitting a revised application, plans and/or specifications and receiving approval of the Chief Building Official for such change. Granting of a permit shall not be construed as a permit for or an approval of any violation of the Building Code or any other state or local law regulating construction or the performance of construction. I hereby certify that I have read and examined this application and the information provided herein is true and correct. I further certify that all construction will comply with the International Building Codes.

APPLICANT'S SIGNATURE _____ DATE: _____

FOR OFFICE USE ONLY: Zoning _____ Planner Approval: _____ Date: _____
Building Inspector Approval: _____ Date: _____
☐ DENIAL OF APPLICATION ☐ INCOMPLETE Date: _____ By: _____
Reason: _____