

BUILDING PERMIT APPLICATION

CITY OF WAYCROSS, GEORGIA
Department of Community Improvement
(912) 287-2944, Office / (912) 287-2948, Facsimile
www.waycrossga.com



INSTRUCTIONS: PLEASE TYPE OR PRINT (IN INK) ALL REQUESTED DATA (Note: An incomplete application may delay the approval process.)

ADDRESS: _____ SUITE/APT: _____ PARCEL #: _____

SUBDIVISION: _____ BLOCK: _____ LOT: _____ ZONE: _____ FLOOD ZONE: _____

PROPERTY OWNER: _____ ADDRESS: _____ PHONE: _____

APPLICANT: _____ ADDRESS: _____ PHONE: _____

CONTRACTOR: _____ ADDRESS: _____ PHONE: _____

EMAIL ADDRESS FOR CONTACT PERSON (THIS PERSON TO RECEIVE NOTIFICATION ON STATUS OF PLAN REVIEW):

ARCHITECT: _____ ADDRESS: _____ PHONE: _____

ENGINEER: _____ ADDRESS: _____ PHONE: _____

JOB VALUATION: \$ _____ SQUARE FEET: _____ HEATED _____ UNHEATED _____

CLASS OF WORK: _____ NEW _____ ADDITION _____ ALTERATION _____ REPAIR _____ SHELL _____ INTERIOR

_____ SINGLE FAMILY DWELLING _____ MULTI-FAMILY RESIDENTIAL _____ COMMERCIAL _____ OTHER

DESCRIPTION OF WORK: _____

“The issuance of this permit authorizes improvements of the real property designated herein which improvements may subject such property to mechanics’ and materialmans’ liens pursuant to Part 3 of Article 8 of Chapter 14 of Title 44 of the Official Code of Georgia Annotated. In order to protect any interest in such property and to avoid encumbrances thereon, the owner or any person with an interest in such property should consider contacting an attorney or purchasing a consumer’s guide to the lien laws which may be available at any building supply home center.”

I HEREBY CERTIFY THAT I HAVE COMPLETED, READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS, ORDINANCES, POLICIES AND PROCEDURES GOVERNING THIS WORK SHALL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. ALL PARTIES INVOLVED IN THIS WORK SHALL COMPLY WITH ALL PROVISIONS OF LOCAL, STATE AND FEDERAL LAWS, ORDINANCES, POLICIES, PROCEDURES AND REGULATIONS. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER LOCAL, STATE OR FEDERAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

UPON PAYMENT OF ALL FEES, THIS APPLICATION BECOMES PART OF THE BUILDING PERMIT. THE PERMIT BECOMES NULL AND VOID IF THE AUTHORIZED WORK IS NOT COMMENCED WITHIN SIX MONTHS, OR IF THE WORK IS SUSPENDED OR ABANDONED FOR A CONTINUOUS PERIOD OF SIX MONTHS AT ANY TIME AFTER INITIAL COMMENCEMENT OF THE WORK. A NEW PERMIT IS REQUIRED IN THESE CASES.

SIGNATURE: _____ DATE: _____ OWNER _____ CONTRACTOR _____ AGENT _____

FOR OFFICE USE ONLY

FLOOD ZONE: _____ ZONING CLASS: _____ DWDA DISTRICT: _____ ELECTION DISTRICT: _____

OCCUPANCY TYPE: _____ SUB-TYPE: _____ # OF UNITS: _____ MAX. OCCUPANT LOAD: _____

CONST. TYPE: _____ # OF BATHS: _____ # OF BEDROOMS: _____

OF STORIES: _____ PAVED PARKING SPACES REQUIRED: _____ SHOWN: _____ CURB CUT REQUIRED: _____

LOT SIZE: _____ X _____ RATIO: _____ SETBACKS: FRONT: _____ REAR: _____ LEFT SIDE: _____ RIGHT SIDE: _____

SPECIAL APPROVALS: ENG DEPT _____ FIRE DEPT _____ PUBLIC WORKS DEPT _____ HEALTH DEPT _____ DEPT OF LABOR _____

DOT _____ SFMO _____ DRI IMPACT _____ RIR IMPACT _____ OTHER _____

COMMENTS: _____

ACCEPTED BY: _____ DATE: _____

APPROVED BY: _____ DATE: _____

ISSUED BY: _____ DATE: _____

PERMIT FEE: _____ PLAN REVIEW/CO FEE: \$ _____ PERMIT #: _____

AFTER COMPLETION, MAKE ONE COPY FOR THE APPLICANT AND A YELLOW COPY FOR THE TAX ASSESSOR. ORIGINAL STAYS IN FILE.