



MORGAN COUNTY PLANNING AND DEVELOPMENT

P.O. Box 1357

150 East Washington Street, Suite 200

Madison, Georgia 30650

Office: (706) 342-4373 Fax: (706) 343-6455

Documents Required for Obtaining a Commercial/Industrial Building Permit

- _____ **Septic Tank Permit or Letter:** Contact the Morgan County Environmental Health Specialist with the Morgan County Health Department located at 2005 South Main Street, Madison, Georgia 30650 or at (706) 752-1268, Ext. 224 for requirements. (Required for new structures or change of use, where public sewer is not available.)
- _____ **Public/Private Sanitary:** Sanitary sewer connection approval
- _____ **Permit Application:** This form is available in the Morgan County Planning and Development Office or it can be downloaded from the Morgan County Website at www.morganga.org. Only complete applications will be accepted.
- _____ **Driveway Application:** This form is available in the Morgan County Planning and Development Office or it can be downloaded from the Morgan County Website at www.morganga.org. (Required when installing a new driveway.)
- _____ **One (1) Recorded Plat of the subject property:** (Maximum Size 11"x17"). Recorded copies of plats may be obtained at the Morgan County Superior Court located at 384 Hancock Street, Madison, Georgia 30650, or for questions you may contact them at (706) 342-3605.
- _____ **One (1) Location Sheet:** Location Sheets may be obtained at the Morgan County Tax Assessor's Office located at 150 East Washington Street, Suite 130, Madison, Georgia 30650, or for questions you may contact them at (706) 342-0551.
- _____ **Building Plans:**
- All structural steel building plans must be stamped by a licensed professional and must have a footing plan designed by a licensed professional.
 - **Commercial Building Permits within Morgan County Require:**
 - Two (2) full size set of plans, two (2) reduced size set of plans (11"x17") and a PDF version of plans. Plans shall include specifications and drawings, drawn to scale with dimensions, with sufficient detail to indicate the nature and character of the work to be performed. All information, drawings, specifications and any other accompanying data shall bear the name and signature of the design professional or person responsible for the plan, drawing or specification.
 - **Commercial Plans** must be drawn to a scale that is legible. Plans for all group A, E and I occupancies, buildings and structures three stories or more in height, buildings and structures 5,000 square feet or more in area, or if deemed necessary by the Building Official are required to be drawn by a licensed professional with affixed seal and signature.
 - **Commercial Plans** must at minimum include the following (If applicable):

| | | |
|----------------------------|-------------------------|--|
| Detail Sheets | Electrical Plan | Fire Protection Plans |
| Site Plan | Plumbing Plan | Life Safety Plan |
| Floor Plan | Mechanical Plan | Landscaping Plan |
| Building Elevation Plan | Door and Finish Details | Structural Plan |
| Foundation Plan | Grading Plan | Sprinkler Plan |
| Fire Alarm Plan Sign Plans | Furniture Layout Plan | Erosion, Sediment and Pollution Control Plan |
 - **Commercial Plan review may take a few weeks to complete. Applicant will be notified when permit is approved or denied. Construction shall not begin until the building permit is issued.**



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Commercial/Industrial Permit Application

(ALL APPLICATIONS HAVE TO BE FILLED OUT COMPLETELY IN ORDER TO BE PROCESSED)

Property Owners Information

| | | |
|------------------------|--------|--------------|
| Property Owner's Name: | | Cell phone#: |
| Address: | | Home phone#: |
| City: | State: | Zip Code: |
| Email Address: | | |

Property Location

| | | |
|--------------------------------------|--------|---------------|
| Project Name: | | Jurisdiction: |
| Property Address: | | |
| City: | State: | Zip Code: |
| Nearest Intersection or Address: | | |
| Name of Subdivision (if applicable): | Lot#: | |

All Contractors Must Provide a copy of State Contractor's and Business License

Contractors Information

| | | |
|------------------------|------------------|---------------|
| Contractor's Name: | | Cell phone #: |
| Contractor's Address: | Office #: | Fax #: |
| City: | State: | Zip Code: |
| Email Address: | | |
| State Certification #: | Expiration date: | |
| Occupational Tax #: | Issuing County: | |
| Project Managers Name: | Telephone #: | |

Type of Building Permit Requested: (Check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Commercial Addition & Remodel | <input type="checkbox"/> Commercial Remodel | <input type="checkbox"/> Industrial Addition & Remodel |
| <input type="checkbox"/> Commercial Addition | <input type="checkbox"/> Commercial Mixed Occupancy | <input type="checkbox"/> Industrial Addition |
| <input type="checkbox"/> Commercial Aircraft Hanger | <input type="checkbox"/> Commercial Stand Alone | <input type="checkbox"/> Industrial Attached |
| <input type="checkbox"/> Commercial Attached | <input type="checkbox"/> Commercial Swimming Pool | <input type="checkbox"/> Industrial Build out |
| <input type="checkbox"/> Commercial Permit Renewal | <input type="checkbox"/> Industrial Permit Renewal | <input type="checkbox"/> Industrial Remodel |
| <input type="checkbox"/> Commercial Build out | <input type="checkbox"/> Industrial Stand Alone | <input type="checkbox"/> Sprinkler System |
| <input type="checkbox"/> Transmission Tower (New) | <input type="checkbox"/> Transmission Tower (Upgrade) | <input type="checkbox"/> Other (Explain) |

Explanation: _____

Occupancy Classification and Group: (Check all that apply)

- | | | | | | |
|--|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> Assembly | <input type="checkbox"/> A-1 | <input type="checkbox"/> A-2 | <input type="checkbox"/> A-3 | <input type="checkbox"/> A-4 | <input type="checkbox"/> A-5 |
| <input type="checkbox"/> Business | <input type="checkbox"/> B | | | | |
| <input type="checkbox"/> Mercantile | <input type="checkbox"/> M | | | | |
| <input type="checkbox"/> Educational | <input type="checkbox"/> E | | | | |
| <input type="checkbox"/> Factory – Industrial | <input type="checkbox"/> F-1 | <input type="checkbox"/> F-2 | | | |
| <input type="checkbox"/> Residential | <input type="checkbox"/> R-1 | <input type="checkbox"/> R-2 | <input type="checkbox"/> R-3 | <input type="checkbox"/> R-4 | |
| <input type="checkbox"/> High Hazard | <input type="checkbox"/> H-1 | <input type="checkbox"/> H-2 | <input type="checkbox"/> H-3 | <input type="checkbox"/> H-4 | <input type="checkbox"/> H-5 |
| <input type="checkbox"/> Institutional | <input type="checkbox"/> I-1 | <input type="checkbox"/> I-2 | <input type="checkbox"/> I-3 | <input type="checkbox"/> I-4 | |
| <input type="checkbox"/> Storage | <input type="checkbox"/> S-1 | <input type="checkbox"/> S-2 | | | |
| <input type="checkbox"/> Utility & Miscellaneous | <input type="checkbox"/> U | | | | |
| <input type="checkbox"/> Single Family Dwelling | <input type="checkbox"/> Two Family Dwelling | | | | |

Building Information: (Please fill in all pertinent information)

Total cost of construction: \$ _____ (cost should be estimated to Fair Market Value)

Structure will have: Electrical HVAC Plumbing

Total number of buildings: _____

Total number of units per buildings: _____

Total number of units: _____

Building Dimensions (Foot print): _____

Number of Stories: _____

Total Square Footage of Building:

Heated/Finished: _____ Sqft. Unheated/Unfinished: _____ Sqft.

Total Square Footage of Floor:

1st Floor Heated/Unheated: _____ / _____ 2nd Floor Heated/Unheated: _____ / _____

3rd Floor Heated/Unheated : _____ / _____ Basement Heated/Unheated: _____ / _____

Grease trap required? Yes No Grease trap size: _____

Is building protected by: Sprinkler System Yes No Alarm System Yes No

Type of Heating System (if applicable):

- Electric Heat Pump Gas Dual Fuel Solar Geo - thermal

Power Company :

- | | |
|--|--|
| <input type="checkbox"/> Georgia Power | <input type="checkbox"/> Walton EMC |
| <input type="checkbox"/> Central Georgia EMC | <input type="checkbox"/> Snapping Shoals EMC |
| <input type="checkbox"/> Rayle EMC | <input type="checkbox"/> Tri County EMC |

Water Supply:

- | | |
|---|---|
| <input type="checkbox"/> Private Well | <input type="checkbox"/> City of Bostwick |
| <input type="checkbox"/> Private Water System | <input type="checkbox"/> City of Rutledge |
| <input type="checkbox"/> Morgan County | <input type="checkbox"/> Town of Buckhead |
| <input type="checkbox"/> City of Madison | |

Sewage (if applicable):

- | | |
|--|---|
| <input type="checkbox"/> Private Septic | <input type="checkbox"/> City of Madison |
| <input type="checkbox"/> Private Sewage System | <input type="checkbox"/> City of Rutledge |

Foundation:

- Basement Basement/Crawlspace Basement/Slab Crawlspace Crawlspace/Slab Monolithic Slab

Foundation Material:

- Dirt Wood Poured Concrete Gravel/Stone Block Brick

Structure Material:

- Wood Steel Concrete Block Brick Poles Combination

Exterior Materials/Covering: (Please check all that apply):

- Aluminum Siding Brick Stone Block Concrete Hardi-Plank/Hardboard Siding Vinyl
 Fiber Cement Siding Wood/Plywood Siding Metal Stucco/Masonry Veneer Particleboard Siding Other

Explain Other: _____

Roof Construction:

- Steel Truss Structural Steel Wood Truss Dimensional Lumber Engineered Lumber Heavy Timber
 Steel Joist Combination

Roof Covering:

- Asphalt/Fiberglass Shingles Concrete Tile Mineral-Surfaced Roll Roofing Wood Shingles/Shake
 Metal Roof Panel Metal Roof Panel Shingle Single-ply Membrane Roof Slate Terracotta Tiles
 Built up Roof Covering Other

Explain Other: _____

Fireplace:

- Insert Masonry Pre-fabricated Wood Stove

Garage:

- Attached Carport Detached No Garage

Environmental:

Is the building within 200 feet of State Waters? Yes No

Are there wetlands on the property? Yes No

Total acreage of the property: _____

Total acreage disturbed: _____

Is there flood plain on the property? Yes No

If yes, give finished floor elevation: _____

Is the property in Conservation Use Program? Yes No

All information is true and accurate to the best of my knowledge.

Applicant

Date



State Licensing Board for Residential and General Contractors

The Authorized Permit Agent form may be used by a licensed contractor to designate an individual to obtain permit(s) on his/her behalf for a project(s). The contractor should submit an Authorized Permit Agent Form for each project that he/she designates an individual to pull permits for. The form is to be given to the permit office in the city or county in which the project is located. Do not send a copy of this form to the Board office unless you are requested to do so.



State Licensing Board for Residential and General Contractors

Authorized Permit Agent Form

License verification by permitting office should be completed by visiting sos.ga.gov/plb/

Licensed Contractor: Individual Qualifying Agent

Name of licensed person

*Please attach a copy of Individual license or Company License (Reflects company and qualifying agent license number)

License number of individual or qualifying agent:

Name of licensed company(if applicable)

License number of company(if applicable):

I, hereby designate Licensed Individual or Qualifying Agent

to apply for and obtain the permit(s) for the *Please attach a copy of the authorized permit agent's driver's license.

project at:

Street address

Apartment or Suite Number

City Zip Code

I, the undersigned, being the contractor as either an individual or a qualifying agent, do hereby affirm and swear, under oath, that all information on this form and on accompanying documents are true and correct.

Signature of individual or qualifying agent

State of County of

Subscribed and sworn to before me this day of 20

Signature of Notary Public (Seal)