

## **BUILDING AND DEVELOPMENT PERMIT APPLICATION**

### **TYPE OF PERMIT**

- |   |   |  |                                      |
|---|---|--|--------------------------------------|
| <input type="checkbox"/> Single Family                  | <input type="checkbox"/> Fence              | <input type="checkbox"/> Driveway Pipe               | <input type="checkbox"/> Electrical  |
| <input type="checkbox"/> Multi-Family                   | <input type="checkbox"/> Pool               | <input type="checkbox"/> Renovation                  | <input type="checkbox"/> Plumbing    |
| <input type="checkbox"/> Commercial                     | <input type="checkbox"/> Solar Panels       | <input type="checkbox"/> Addition                    | <input type="checkbox"/> Mechanical  |
| <input type="checkbox"/> Fire Alarm                     | <input type="checkbox"/> Accessory Building | <input type="checkbox"/> Construction Trailer (Temp) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Fire Sprinkler                 | <input type="checkbox"/> Demolition         | <input type="checkbox"/> Moving of Bldg/Structure    | _____                                |
| <input type="checkbox"/> Manufactured Home – Year _____ |   | Model _____  | _____                                |

Date: \_\_\_\_\_ Estimated Value\*: \_\_\_\_\_ Permit No: \_\_\_\_\_

*\*If in the opinion of the Building Inspector or City Administrator, the valuation of the building, alteration or structure appears to be underestimated on the application, the City will utilize the Marshall and Swift's Residential Cost Handbook and Marshall and Swift Valuation Service to determine the valuation. The valuation from Marshall and Swift will be the basis for permit issuance. Valuation from Marshall and Swift is determined by final by final cost to the buyer/owner of the structure.*

Address of Building/Structure: \_\_\_\_\_

Lot #: \_\_\_\_\_ Subdivision: \_\_\_\_\_

PIN #: \_\_\_\_\_ Zoning: \_\_\_\_\_ Flood Zone: \_\_\_\_\_

Setbacks: F \_\_\_\_\_ R \_\_\_\_\_ S \_\_\_\_\_ Total Sq. Ft. of Lot: \_\_\_\_\_

Heated Sq. Ft.: \_\_\_\_\_ Non-Heated Sq. Ft.: \_\_\_\_\_

Total Sq. Ft. of Building / Addition: \_\_\_\_\_ No. of Stories: \_\_\_\_\_

Bedrooms: \_\_\_\_\_ Bathrooms: \_\_\_\_\_ Fireplaces: \_\_\_\_\_

Sewer  Septic\*\*  Sprinkler System  Fire Alarm

Public Water  Private Well  Automatic Fire Control System

### **USE:**

- |  |  |   |  |                                      |
|--|--|---|--|--------------------------------------|
| <input type="checkbox"/> Single Family Residence | <input type="checkbox"/> Office        | <input type="checkbox"/> Duplex         | <input type="checkbox"/> Factory         | <input type="checkbox"/> Screen Rm.  |
| <input type="checkbox"/> Apartment               | <input type="checkbox"/> Warehouse     | <input type="checkbox"/> Private Garage | <input type="checkbox"/> Auto Storage    | <input type="checkbox"/> Svc. Change |
| <input type="checkbox"/> Storage Building        | <input type="checkbox"/> Repair Garage | <input type="checkbox"/> Church         | <input type="checkbox"/> Service Station | <input type="checkbox"/> Pressure    |
| <input type="checkbox"/> Accessory Building      | <input type="checkbox"/> Hotel / Motel | <input type="checkbox"/> Other: _____   |  |                                      |

### **TYPE OF CONSTRUCTION:**

- Erect  Repair  Alter  Make Addition To  Demolish  Move

**Please provide Name, Address & Phone Number for the following:** (Should be filled out completely before review)

OWNER: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

ARCHITECT: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

ELECTRICAL CONTRACTOR: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

PLUMBING CONTRACTOR: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

MECHANICAL CONTRACTOR: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

*A Site Plan and two (2) complete sets of plans must accompany this application. This form must be filled out completely before consideration of application. Construction in some areas may impact wetlands and require a 404 permit from the Corps of Engineers. Permit Holder agrees to hold the City of Port Wentworth harmless on any construction covered by this permit resulting in construction in wetlands. This permit becomes null and void if work or construction authorized is not commenced within a one (1) year period.*

*In consideration of the granting of the above requested permit, I do hereby agree that I will in all respects construct the work in accordance with the above statement and the Plans and Specifications herewith submitted, and filed with the City of Port Wentworth, and in compliance with all the state and local laws and ordinances.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State & Zip Code

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Email Address

<b><u>FEES:</u></b>	
Permit Fee:	\$ _____
Admin Fee:	\$ _____
Plan Check Fee:	\$ _____
Tap Fee:	\$ _____
Aid-to-Const:	\$ _____
Other:	\$ _____
<b>Total:</b>	<b>\$ _____</b>
Date Paid:	_____

**APPROVED:**

\_\_\_\_\_  
Building Inspector

Date: \_\_\_\_\_

**NOTES:**