NEWTON COUNTY

APPLICATION PACKAGE FOR ACCESSORY STRUCTURE **OR** ADDITION/REMODEL

NEWTON COUNTY

APPLICANT CHECK SHEET FOR AN ACCESSORY STRUCTURE/ADDITION

(DOCUMENTS AND QUANITIES REQUIRED)

Newton County Department of Planning and Development
113 Usher Street, Covington Georgia 30014
678-625-1650

ITEM	REQUIRED ITEM	# OF COPIES	Where to obtain	CHECK
1.	Application form	One (1)	Planning & Development	
2.	Zoning Compliance form	One (1)	Planning & Development	
3.	Recorded plat of property	One (1)	Judicial Building	
4.	Floor plan	One (1)	Applicant	
5.	Site plan	One (1)	Applicant	
6.	Approval letter from Environmental Health (if served by septic)	One (1)	Environmental Health	
7.	Notarized letter from property owner (if not applicant)	One (1)	Property owner	
8.	Fees		To be determined once permit is processed. Payment by check, money order or credit/debit card (3.5% convenience fee) only.	

REQUIRED ITEMS FOR ACCESSORY STRUCTURES/ADDITIONS:

ITEM l. APPLICATION FORM: Applications can be obtained at the Newton County Department of Planning & Development. All applications must be completely filled out in order to process your request.

ITEM 2. ZONING COMPLIANCE FORM: Zoning Compliance forms may be obtained from the Newton County Department of Planning & Development and are required in order to determine compliance of the proposed project with applicable zoning ordinances.

ITEM 3. RECORDED SURVEY PLAT: A recorded plat of the property can be obtained from the Clerk of Superior Court located in the Judicial Building.

ITEM 4. FLOOR PLAN: The floor plan should reflect the depth and width of the proposed structure. All rooms should be included and labeled as clearly as possible. Please provide a reduced copy (8 ^{1}/2 x 11). A drawing or

photograph depicting the exterior of the structure must accompany the permit application to determine compliance.

ITEM 5. SITE PLAN: An aerial view of the property with the following information: location of the primary structure, proposed location of new structure/addition, and front, rear and side property measurements from the proposed location.

ITEM 6. LETTER OF APPROVAL FROM ENVIRONMENTAL HEALTH: If the property is served by a septic system, please contact Environmental Health (770-784-2121) in order to obtain a letter of approval to proceed with your project. Applications cannot be processed without prior approval from Environmental Health.

ITEM 7. NOTARIZED LETTER FROM PROPERTY OWNER: If the applicant differs from the property owner, a notarized letter will be required. The letter should state the applicant has the permission of the property owner to alter/make proposed changes to the property/structure.

ITEM 8. FEES: Permit fees are calculated by square footage and will vary depending on the size of the project(s). Fees may be paid by credit/debit, check or money order. Cash and counterchecks will not be accepted.

Additional information as applicable:

- If the property is located within the city/town limits of Mansfield or Newborn, you will have to get approval through their office first before submitting an application to our department.

- All projects vary in scope; therefore, additional items may be required upon request (i.e., elevations, engineer's letter, scope of work, alternative materials spec sheet, etc.).

Incomplete applications will not be accepted. Applicants are advised to ensure that ALL documents are provided to the Department at time of submittal. Failure to submit all documentation will result in the delay of your project.

DEPARTMENT OF DEVELOPMENT SERVICES
NEWTON COUNTY, GEORGIA
1113 USHER STREET, COVINGTON GA 30014, STE 201 (678-625-1650)
APPLICATION FOR ACCESSORY/ADDITION/REMODEL BUILDING PERMIT

NEWTON CO., GEORGIA, _____ PERMIT NO. _____

Application is hereby made according to the laws and ordinances of Newton County, Georgia, for a permit to erect, alter, and use a structure as described herein or shown on accompanying plans and specifications to be located as shown on accompanying plot plan, and if same is granted agree to conform to all laws and ordinances regulating same.

ACCESSORY STRUCTURE ☐ ADDITION/REMODEL ☐ REPAIR ☐

PROJECT ADDRESS: _____

TAX MAP & PARCEL# _____ **ZONING**_____ **Overlay** _____

PROJECT DETAILS:

a Existing (no permit): _____, **(Permitted)**_____

Type: Residential _____ **Non Residential** _____ **Fire Damaged** _____

What is it?
Addition: Room _____, **Closet** _____ **Deck/ Patio** _____, **Garage**_____,

Accessory Dwelling Unit (ADU): _____ **Describe:** _____

Other Accessory Structure- (Describe): _____

Exterior Materials: _____

Accessory location: Side Yard _____ **Back/ Rear Yard**_____

Project Notes: _____

b New structure: _____

Type: Residential_____ **Non Residential** _____

What is it?
Addition: Room _____ **Closet**_____ **Deck/ Patio** _____ **Garage** _____

Accessory Dwelling Unit (ADU) _____ **Describe:** _____

Other Accessory Structure (Describe): _____

Exterior Materials: _____

Accessory location: Side Yard _____ **Back/ Rear Yard**_____

Project Note: _____

OWNER OCCUPIED _____ **RENTAL PROPERTY** _____

SUBDIVISON NAME: _____ **LOT NUMBER**_____ **HLDP/SPA**_____

HEATED SQ FT OF PPRIMARY BLDG: _____ **UNHEATED SQ FT OF PRIMARY BLDG** _____

HEATED SQ FT (Accessory/Addition): _____ **UNHEATED SQ FT ((Accessory/Addition):** _____ **GARAGE (accessory):** _____

DISTANCE FROM PROPERTY LINE: FRONT: _____ **SIDES:** _____/_____ **REAR:** _____

BUILDING FRONTAGE: _____ **DEPTH:** _____ **# BEDROOMS:** _____ **# BATHS:** _____

TOTAL # OF ROOMS: _____ **SOURCE OF WATER:** _____ **ESTIMATED COST OF PRJ:** _____

TYPE OF HEAT: _____ **AMPERAGE** _____ **POWER PROVIDER:** _____

TYPE OF CONSTRUCTION: WOOD_____, **MASONRY** _____, **METAL** _____,

TYPE OF FOUNDATION: SLAB_____, **CRAWL SPACE** _____, **BASEMENT (Finished)**_____ **(Unfinished)** _____

INTERIOR FINISH: _____ **MATERIAL IN ROOF:** _____

Property Owner Information:

Name: _____

Address: _____

Telephone: _____ Email: _____

Applicant Information ***(if different than property owner)***

Name: _____

Address: _____

Telephone: _____ Email: _____

Contractor Information (*State Contractors License must be provided)*

Contractor: _____

Address: _____

Telephone: _____ Email: _____

Please read the following carefully and initial:

_____ The issuance of this permit authorizes improvements of the real property designated herein, which improvements may subject such property to mechanics' and materialmens' 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 consumers' guide to the lien laws which may be available at building supply home centers. (O.C.G.A. 8-2-26)

_____ This permit becomes null and void if work or construction authorized is not commenced within six (6) months, or construction or work is suspended or abandoned for a period of six (6) months at any time after work is started.

_____ I, the undersigned, understand that for any projects on which a previous owner conducted the work, I am responsible for ensuring all work meets the applicable building and fire codes, even work that was done without a permit, prior to my acquiring the property and/or prior to my becoming the contractor of record. This applies to properties acquired through foreclosure, resale, inheritance, etc. Please see Sections 1.3.7 and 3.12 of the Newton County Permits Administrative Ordinance.

_____ Building plans for residential permits are required for the purpose of verifying zoning standards and will not be reviewed for design or construction standards.

_____ In accordance with O.C.G.A. 48-5-264.1, please be advised that staff of the Newton County Tax Assessor's Office will be visiting your property to obtain information on the improvements authorized by this building permit. If you have any questions regarding a visit, please contact the Assessor's Office at (770) 784-2030.

I hereby certify that I have read and examined this document and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. Granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

_____ _____/____/_____

(SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT) DATE

I hereby certify that this will be my own personal home. I certify that my immediate family or I will perform all work. I also certify that I have not purchased a building permit for a residence in the last two (2) years.

_____ _____/____/_____

(SIGNATURE OF HOMEOWNER) DATE

DO NOT REMOVE THIS PAGE

Newton County Development Services
Zoning Compliance Form

This form is used to determine compliance of the proposed project with applicable zoning ordinance standards. Please complete all of the information below. Additional information may be required from the Fire Department, Environmental Health Department or other county offices.

Applicant's Name _____
Phone Number _____
Project Address _____
Zoning District _____
Map & Parcel # _____
Explanation of Project _____

A Building Permit application cannot be processed without the following information (additional information may also be required):

1. A Plat or Survey including dimensions, distances, and property lines.
2. A Site Plan of the property showing the following:
   a. Location of all proposed and existing structures
   b. Setbacks of proposed structures from property lines
   c. Setbacks of proposed structures from streams and other bodies of water
   d. Square footage of all structures
3. Floor Plan including square footage of project.
4. If constructing an accessory building in **R1, R2, R3, DR, RMF, MSR, MHP** or **MHS** districts, include a copy of a rendering or elevation for proposed structure.
5. If constructing any buildings on any Georgia Power Lease Lot or any deeded waterfront lot on Jackson Lake, written approval of the proposed site plan from Georgia Power Land Management must be submitted.

I have provided the required information as listed above. I understand that unless Otherwise noted this form is valid for 30 days from the date below.

Applicant's Signature _____ Date:_____

DO NOT REMOVE THIS PAGE

********** **OFFICIAL USE ONLY**********

First Review

☐ Compliance ☐ Non-Compliance

Reason for Non-Compliance:

_____

_____

_____

Suggested Remedies _____

_____

_____

General Comments: _____

_____

_____

Date of Review ____/____/____ Date Applicant notified: ____/____/_____

_____/_____/_____/_____

Director /Planner /Zoning Administrator/ 3rd Party Designee Signature

Second Review

☐ Compliance ☐ Non-Compliance

Reason for Non-Compliance:

_____

_____

_____

Suggested Remedies_____

_____

_____

General comments: _____

_____

_____

Date of Review ____/____/____ Date Applicant notified: ____/____/_____

_____/_____/_____/_____

Director /Planner /Zoning Administrator/ 3rd Party Designee Signature

Newton County Sub-Contractor Affidavit

(State, Business & Driver's License Required)

1113 Usher St, Ste 201, Covington, GA 30014 | 678-625-1650 | building@co.newton.ga.us

THIS FORM MUST BE COMPLETED, SIGNED, AND SUBMITTED TO NEWTON COUNTY DEVELOPMENT SERVICES 24 HOURS PRIOR TO THE REQUIRED ROUGH INSPECTION(S).

WE MUST HAVE ORIGINAL SIGNATURES IN BLUE INK.

Combination Permit Number_____ Date of Permit _____

Subdivision _____ Lot #_____

Job Site Address_____

Contractor_____

Owner_____

STATE LICENSED SUB-CONTRACTORS

ELECTRICIAN (CHECK CLASS I RESTRICTED [ ]; CLASS II UNRESTRICTED [ ])

Company or Contractor_____ Address_____

State Card #_____

City or Co. Occupational Lic #_____ Issue Date_____

Print Name_____ Phone # _____

Card Holders Signature_____

PLUMBER (CHECK CLASS I RESTRICTED [ ]; CLASS II UNRESTRICTED [ ])

Company or Contractor_____ Address_____

State Card #_____

City or Co. Occupational Lic #_____ Issue Date_____

Print Name_____ Phone # _____

Card Holders Signature_____

HVAC (CHECK CLASS I RESTRICTED [ ] ; CLASS II UNRESTRICTED [ ])

Company or Contractor_____ Address_____

State Card #_____

City or Co. Occupational Lic #_____ Issue Date_____

Print Name_____ Phone # _____

Card Holders Signature_____

LOW VOLTAGE (CHECK CLASS I RESTRICTED [ ]; CLASS II UNRESTRICTED [ ]

Company or Contractor_____ Address_____

State Card #_____

City or Co. Occupational Lic #_____ Issue Date_____

Print Name_____ Phone # _____

Card Holders Signature_____

I DO CERTIFY THAT I AM RESPONSIBLE FOR EACH LICENSED CONTRACTOR TO OBTAIN AN OCCUPATIONAL TAX LICENSE. ANY FALSE INFORMATION OR REPRESENTATIVE WILL BE PROSECUTED UNDER ALL APPLICABLE LAWS OR ORDINANCES IN THE EVENT OF ANY CHANGE IN MY STATUS ON THIS INSTALLATION; I UNDERSTAND THAT I WILL BE HELD RESPONSIBLE FOR THIS JOB UNTIL BUILDING INSPECTIONS HAS BEEN NOTIFIED, IN WRITING, OF ANY CHANGE.

_____

(Combination Permit Holder)

NEWTON COUNTY DEPARTMENT OF DEVELOPMENT SERVICES
BUILDING INSPECTION INFORMATION

- To schedule a building inspection, please call (678) 625-1650, email building@co.newton.ga.us or submit a request through the inspection portal: https://newtondevelopment.ncboc.com. Inspection requests must be received by 3:00 p.m. in order to be scheduled for the next available business day.

- If you cancel an inspection by phone, email or in the field, a $25 cancellation fee will be applied.

- Only five (5) inspections may be scheduled per day, per subdivision.

- Any re-inspection fees must be paid prior to scheduling a final inspection.

- Inspections **will not** move forward if there are Stop Work Orders or incomplete/missing paperwork applicable to your specific project (i.e., Engineer letters, HLDP As-Builts, landscape plan approvals, Sub-Contractor Affidavits). Administrative staff are here to assist with the facilitation of your inspections; not to manage your projects.
- **Permits must be posted on site in a permit box**. **The inspector will not perform the inspection if the permit card is not posted.** Failure to post the permit may result in the delay of your project, as well as re-inspection fees. If you need to relocate the permit box for landscaping, etc., please place it in the garage.

- Certificates of Occupancy will be available **48 hours** after the final inspection has been conducted.

- Residential building inspections include (list is not all inclusive and may vary from project to project):

    - Lot (Must be conducted in order to move forward with other inspections)
    - Wall
    - Slab
    - Plumbing/Slab
    - Footings
    - House Wrap
    - *Rough-In (framing, plumbing, electrical and mechanical)
    - Insulation
    - Final (A blower door test is required)
    - Final landscaping inspection

*Please make sure drywall is not stored in the house until after the rough-in inspection has been conducted.