McIntosh County Building & Zoning
912-437-6603
P.O. Box 2694
100 Madison Street
Darien, GA 31305

In order to obtain a permit for construction/placement of an ACCESSORY BUILDING, you must have the following:

1. Copy of your **septic tank location verification.** *

2. Copy of either your **water tap-in receipt**, **will-serve letter**, **or other proof of water service**, ***if new service is applied for***.

3. **Approval from Road Dept.,** if a ***new*** driveway is constructed. **

4. A copy of your **approved/recorded plat,** (available at the Clerk's office).

5. A **plot plan/site plan**, which MUST include: measurements/setbacks from property lines, ALL structures currently on the property and their sizes, septic tank and drain field locations, and all proposed structures/additions and their sizes.

6. **Two (2) complete sets of plans**, including a footing and wall detail.

7. **One (1) complete set of plans**, including a footing and wall detail, on a **jump/thumb drive**.

8. **A copy of the state licenses for your General Contractor, Electrician, Plumber, & HVAC contractors**, as well as a copy of the **Concrete Contractor's business license**.

9. **Application page**, **Contractors' pages**, and **Affidavit sheets** filled out and signed.

Important Phone Numbers

*McIntosh County **Building & Zoning Department**: (912) 437-6603*

* *Environmental Health Department **(for septic location verification)**: (912) 832-5473*

** *McIntosh County **Road Department**: (912) 832-5220*

Last Name: _____

STAFF check ONLY	HOMEOWNER check

QUICK CHECK:
Do you have ALL of the following??

Application review for your permit CANNOT/ will not begin until ALL documentation is received, with all forms completed and signed.

STAFF USE ONLY:
All documents included and READY FOR REVIEW:

Staff Initials: _____

Date: _____

___ ___ Application Sheet completed

___ ___ Contractors' page completed and signed

___ ___ Subcontractors' page completed and signed

___ ___ *Homeowner's Affidavit(s),* ***if they will be General Contractor or doing their own Electric, Plumbing, or HVAC***

___ ___ Affidavit page #1 signed & dated

___ ___ Affidavit page #2 initialed, signed & dated

___ ___ Copy of Septic Tank Permit/Location Inspection for Drain Field

___ ___ Water Tap-In Receipt/Will-Serve letter or other proof of water. Water provider: _____

___ ___ Driveway culvert status: ___ No culvert required ***(Letter from McIntosh County Road Dept attached?)***
___ Existing culvert meets Building Code
___ Culvert will be installed to code

___ ___ Copy of current Deed, showing ownership

___ ___ Copy of approved/recorded Plat

___ ___ *Elevation Certificate,* ***if property is in a Flood Zone.***

___ ___ Copy of Plot Plan/Site Plan, which MUST include ALL structures currently on the property and their sizes, setbacks/measurements from all property lines, septic and drain field locations, and any proposed structures and their sizes.

___ ___ Two (2) complete sets of plans with a footing and wall detail ***AND***

___ ___ One (1) jump drive (digitized copy)

___ ___ Copy of General Contractor's State license

___ ___ Copy of Electrician's State license

___ ___ Copy of Plumber's State license

___ ___ Copy of HVAC contractor's State license

___ ___ Copy of Concrete Contractor's Business license

****NOTE****
RESIDENCES within 200 feet of County water must hook up to County water.

COMMERCIAL BUSINESSES within 500 feet of County water must hook up to County water.

McIntosh County Building Department

100 Madison Street
P.O. Box 2694
Darien, Georgia 31305
(912) 437-6603

PERMIT #

_____

(For Office Use Only)

ACCESSORY BUILDING Permit Application

All fields throughout this application are required to be completed*

Owner/Applicant: _____

Property (Build-Site) Address: _____

Mailing Address (if different than above): _____

Telephone #: _____ Email Address: _____

Contact Name & Telephone #: _____

Contractors: General: _____

Electrician: _____

Plumbing: _____

HVAC: _____

Description of work to be done: _____

_____

Map & Parcel #: _____ **Lot #:** _____ **Zoning:** _____ **Flood Zone:** _____

Total Building Height: _____ No. of Stories: _____ Total acreage: _____

No. of Bathrooms: _____ No. of Toilets: _____

Square Feet: Heated: _____ Garage/Storage: _____

Porch/Carport: _____ ****Total Square Footage under roof**: _____

Overall Width of Structure: _____ Overall Depth of Structure: _____

Heating Type: _____ A/C Type: _____

Ventilation: _____ Roof Type: _____

Engineered Trusses: _____ Stick Building _____ Foundation: _____

Interior Walls: _____ Exterior Walls: _____

No. of Fireplaces: _____

Last Name: _____

FOR OFFICE USE ONLY
Director's Approval:
Date: _____ ---------- -- Inspector's Approval:
Date: _____

STAFF USE ONLY

____ Application sheet, completed

____ Contractors' page, completed

____ Subcontractors' page, completed

____ *Homeowner's Affidavit(s),* ***if they will be General Contractor or doing their own Electric, Plumbing, or HVAC***

____ Affidavit Page #1 signed & dated

____ Affidavit Page #2 signed, initialed & dated

____ Septic Tank Permit/Location Verification (required due to Drain Field)

____ Driveway Culvert Status: ____ No Culvert required
____ Existing culvert meets Building Code
____ Culvert will be installed to Code

(Letter from Road Dept. attached?)

____ Copy of approved/recorded Plat

____ *Elevation Certificate,* ***if property is in a Flood Zone.***

____ Plot Plan/Site Plan which includes ALL structures currently on the property and their sizes, setbacks/measurements from all property lines, septic tank and drain field locations, and all proposed structures and their sizes.

____ Two (2) complete sets of Plans, including a footing & wall detail, **AND** ____ one (1) jump drive (digitized copy)

____ Copy of Licenses for all contractors:
___ General Contractor, State license
___ Electrician, State license
___ Plumber, State license
___ HVAC, State license
___ Concrete, Business license.

PERMIT #_____
(For Office Use Only)

Last Name: _____

PERMIT #_____
(For Office Use Only)

List of subcontractors to work on this job:

General Contractor: _____

Contact #: _____

Electrical Contractor: _____

Contact #: _____

Plumbing Contractor: _____

Contact #: _____

Heating & Air Contractor: _____

Contact #: _____

Framer: _____

Contact #: _____

Concrete Contractor: _____

Insulation Contractor: _____

(Changes in subcontractors)

If, for any reason, the subcontractors are changed or replaced, I, as the General Contractor, understand that I have 48 hours to inform and present all required paperwork to the Building and Zoning Office. **FAILURE TO COMPLY WITH THE ABOVE REQUIREMENT COULD RESULT IN CRIMINAL PROSECUTION.**

_____
Printed Name of General Contractor

_____ _____
Date **Signature Required**

The issuance of this permit authorizes improvements of the real property designated herein, which improvements may subject such property to mechanic's and materialmen's 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 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 building supply home centers.

_____ _____
Date **Signature Required**

Last Name: _____

Affidavit Page 1

ACCESSORY BUILDING Permit Application

I understand that I, as the landowner/homeowner, am responsible for approvals from any subdivision Property Owner's Association for covenant requirements.

Homeowner: ____ **NOT APPLICABLE/ No POA/HOA**

_____ _____

Date **Signature Required**

For houses being built in Flood Zone areas:

The regulation to build at or above the required flood elevation has been explained to me. I understand that areas below the required elevation may only be used for the parking of vehicles, building access (staircase or floodproofed elevators) and limited storage for equipment necessary for lawn or building maintenance. I further understand that should I violate any of these regulations I may be required to remove the enclosure, that my insurance carrier may be notified, and that further remedy may be sought through the courts.

An Elevation Certificate is required upon completion of the slab before continuing up with the walls. ____ **NOT APPLICABLE/ Not in a Flood Zone**

_____ _____

Date **Signature Required**

I have been explained and understand the regulations pursuant to the State of Georgia Water Quality Control Act, Title 12 Chapter 5 that **NO CONSTRUCTION** may occur within **25 feet of the marsh, 50 feet on waters designated as "trout streams",** as delineated by the Georgia Department of Natural Resources. These setbacks are considered permanent buffers and shall remain in its natural and undisturbed state.

____ **NOT APPLICABLE/ Not a waterfront property**

_____ _____

Date **Signature Required**

Last Name: _____

Permit #_____
(for office use only)

Affidavit Page 2

ACCESSORY BUILDING Permit Application

Burning or Burying of any construction/demolition material is a violation of State Law.

_____ Initial

Please call for inspections. Allow at least 24 hours advance notice (by 12pm previous day).

_____ Initial

If an inspection fails, or if an inspection is called in and not ready when the Inspector shows up onsite, a Re-inspection Fee will be charged and must be paid before the Inspector can re-visit the site:

1st: $35.00

2nd: $50.00

3rd: $65.00 _____ Initial

I hereby certify that I have read and examined this permit application 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. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local laws regulating construction or the performance of construction. This permit becomes null and void if work or construction authorized is not commenced within six (6) months or if construction is suspended or abandoned for a period of six (6) months at any time after work is commenced.

_____ _____

Owner/Taxpayer or Agent's Signature Date