DEPARTMENT OF DEVELOPMENT SERVICES
NEWTON COUNTY, GEORGIA
APPLICATION FOR TEMPORARY 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.

PROJECT DETAILS/DESCRIPTION OF ACTIVITY: _____

PROJECT ADDRESS: _____ CITY _____ ZIP _____

DISTANCE(S) FROM: FRONT PROPERTY LINE _____ SIDE PROPERTY LINE _____ REAR PROPERTY LINE _____

BUILDING FRONT _____ BUILDING DEPTH _____ TOTAL SQ FOOTAGE: _____ HEATED? YES or NO

WILL THE STRUCTURE REQUIRE POWER? YES or NO IF YES, POWER PROVIDER: _____

REQUESTED DATE STRUCTURE TO BE PLACED? ____/_____/_____

OTHER INFORMATION NEEDED:

1. MUST PROVIDE A SITE PLAN INDICATING WHERE THE STRUCTURE WILL BE PLACED. SITE PLAN MUST INCLUDE SETBACKS FROM ADJOINING PROPERTY LINES AND OTHER STRUCTURES ON PROPERTY.

2. ANY OTHER ADDITIONAL PAPERWORK OR DOCUMENTS AS MAY BE REQUESTED TO ASSIST THE DEPARTMENT IN MAKING A DETERMINATION IN YOUR REQUEST.

Sec. 510-640 TEMPORARY BUILDING

A. Temporary buildings shall be approved administratively by the Zoning Administrator. Except where otherwise specifically permitted, temporary buildings shall not be allowed in any district except when used in conjunction with construction work or pending completion of a permanent building for a period not to exceed one year. The time period may be extended upon approval by the Planning Director.

B. Temporary buildings used at development construction sites shall require a building permit only. (Moving permit is not applicable.)

C. Temporary buildings shall be located at least 50 feet from any residence or street right-of-way line.

D. Temporary buildings shall be removed when the construction has been completed.

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: _____ City/State/Zip _____

Telephone: _____ Email: _____

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

Contractor Name: _____ Company Name: _____

State License #: _____ Business License #: _____

Address: _____ City/State/Zip: _____

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.

_____ 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**

OFFICE USE ONLY

Zoning: _____ **Map & Parcel #:_____** **Address Verified: YES or NO**

APPROVED OR DENIED

Zoning Administrator: _____ Date: ___/____/____

Date Temporary Structure Approved for 1 (one) year: ___/____/_____
Initial Date of Expiration of Approval: ____/_____/_____

Conditions of Approval or Reason for Denial:

_____
_____
_____
_____