

**APPLICATION FOR ZONING CERTIFICATE AND BUILDING PERMIT  
SPALDING COUNTY, GEORGIA**

APPLICATION NO. \_\_\_\_\_ ZONING CERTIFICATE \_\_\_\_\_ PERMIT NO. \_\_\_\_\_ FEE \$ \_\_\_\_\_ REC. \_\_\_\_\_

I HEREBY MAKE APPLICATION FOR A ZONING CERTIFICATE AND BUILDING PERMIT PROVIDING ALL  
INFORMATION AND ATTACHMENTS AS MAY BE REQUIRED BY THE ADMINISTRATIVE OFFICIALS TO:

ERECT \_\_\_\_\_ MAKE ADDITION \_\_\_\_\_ REMODEL \_\_\_\_\_ REPAIR \_\_\_\_\_ OTHER \_\_\_\_\_  
SINGLE FAMILY \_\_\_\_\_ MANUFACTURED \_\_\_\_\_ MULTI-FAMILY \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ ACCESSORY \_\_\_\_\_ OTHER \_\_\_\_\_  
(give a brief description of remodel/repair/other work) \_\_\_\_\_

APPLICANT \_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_

TELEPHONE (\_\_\_\_) \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_ BUILDING ADDRESS \_\_\_\_\_

**(BUILDING ADDRESS MUST BE POSTED ON PROPERTY BEFORE A FINAL INSPECTION WILL BE COMPLETED)**

TAX MAP REFERENCE \_\_\_\_\_ BLOCK \_\_\_\_\_ PARCEL \_\_\_\_\_ LOT \_\_\_\_\_ ZONING DISTRICT \_\_\_\_\_

LOT DESCRIPTION: ACRES \_\_\_\_\_ FRONT FEET \_\_\_\_\_ DEPTH OF SIDE \_\_\_\_\_

IS PROPERTY LOCATED IN A FLOOD ZONE: Y \_\_\_ N \_\_\_ (ATTACH COPY OF APPROVED SITE PLAN)

ESTIMATED CONSTRUCTION COST TO COMPLETE (excluding lot): \$ \_\_\_\_\_

**BUILDING INFORMATION**

(Please fill in completely and accurately with all applicable information.)

LENGTH _____	SQ.FOOTAGE HEATED _____	NO. BATHS _____
WIDTH _____	SQ.FOOTAGE GARAGE _____	NO.BEDROOMS _____
STORIES _____	SQ.FOOTAGE CARPORT _____	TOTAL ROOMS _____
1 <sup>ST</sup> FLOOR SQ. FT. _____	SQ.FOOTAGE PORCHES _____	TOTAL SQ. FOOTAGE _____
FIREPLACE: Y N	SQ.FOOTAGE BASEMENT _____	

**FOUNDATION:** BASEMENT \_\_\_\_\_ CRAWL SPACE \_\_\_\_\_ SLAB \_\_\_\_\_ BLOCK \_\_\_\_\_ POURED WALLS \_\_\_\_\_ PIERS/SKIRTING \_\_\_\_\_

**INTERIOR WALLS:** DRYWALL \_\_\_\_\_ WOOD \_\_\_\_\_ PANEL \_\_\_\_\_ OTHER \_\_\_\_\_ **ATTIC AREA:** FINISHED \_\_\_\_\_ UNFINISHED \_\_\_\_\_

**FLOOR FINISH:** CARPET \_\_\_\_\_ VINYL \_\_\_\_\_ TILE \_\_\_\_\_ HARDWOOD \_\_\_\_\_ OTHER \_\_\_\_\_ **FIREPLACE:** MASONRY \_\_\_\_\_ INSERT \_\_\_\_\_

**ROOF TYPE:** GABLE \_\_\_\_\_ HIP \_\_\_\_\_ OTHER \_\_\_\_\_ **ROOF PITCH:** \_\_\_\_\_ **ROOFING:** SHINGLES \_\_\_\_\_ METAL \_\_\_\_\_ OTHER \_\_\_\_\_

**EXTERIOR FINISH:** WOOD \_\_\_\_\_ MASONITE \_\_\_\_\_ BRICK \_\_\_\_\_ VINYL \_\_\_\_\_ HARDBOARD \_\_\_\_\_ STUCCO \_\_\_\_\_ OTHER \_\_\_\_\_

**HEATING SYSTEM:** CENTRAL HEAT \_\_\_\_\_ CENTRAL AIR \_\_\_\_\_ HEAT PUMP \_\_\_\_\_ OTHER \_\_\_\_\_

**SANITATION:** SEPTIC TANK \_\_\_\_\_ (attach copy of Health Dept Permit) PUBLIC SEWER \_\_\_\_\_ **WATER:** PUBLIC \_\_\_\_\_ PRIVATE \_\_\_\_\_

**PLUMBING: (please give number of each)** TUBS \_\_\_\_\_ SHOWERS \_\_\_\_\_ TUB/SHOWER \_\_\_\_\_ LAVATORIES \_\_\_\_\_ TOILETS \_\_\_\_\_

KITCHEN SINKS \_\_\_\_\_ WATER HEATER \_\_\_\_\_ DISHWASHER \_\_\_\_\_ FLOOR DRAINS \_\_\_\_\_ WASHING MACHINE \_\_\_\_\_ OTHER \_\_\_\_\_

**SWIMMING POOL (IF APPLICABLE) \*attach copy of Health Dept. approval when septic tank is used on the property)**

LENGTH \_\_\_\_\_ WIDTH \_\_\_\_\_ ODD SHAPE \_\_\_\_\_ VINYL \_\_\_\_\_ GUNITE \_\_\_\_\_ FIBERGLASS \_\_\_\_\_

**MANUFACTURED HOME INFORMATION:** OWNER OF HOME \_\_\_\_\_

MANUFACTURER \_\_\_\_\_ MODEL NAME \_\_\_\_\_ SERIAL NO. \_\_\_\_\_

YEAR MODEL \_\_\_\_\_ DATE OF PURCHASE \_\_\_\_\_ PURCHASED FROM \_\_\_\_\_

IS THIS AN APPROVED INDUSTRIAL BUILDING: Y N BUILDING CLASS \_\_\_\_\_ SEPTIC TANK APPROVAL: Y N

SITE PLAN ATTACHED: Y N ANSI INSPECTION REQUIRED: Y N ANSI INSPECTION COMPLETED \_\_\_\_\_

ANSI INSPECTION COMPLETED BY \_\_\_\_\_ MOVING COMPANY \_\_\_\_\_

INSTALLER \_\_\_\_\_ ADDITIONAL REQUIREMENTS FOR APPROVAL OF PERMIT: \_\_\_\_\_

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**BEFORE PERMANENT POWER CAN BE APPROVED, THE FOLLOWING ITEMS MUST BE COMPLETED: PERMANENT FOUNDATION; MINIMUM 4'X4' FRONT AND BACK PORCH, ATTACHED; 4:12 ROOF PITCH; REMOVAL OF TONGUE, AXLES, TRANSPORTING LIGHTS, AND TOWING APPARATUS**

**ENERGY CODE COMPLIANCE METHOD:** Prescriptive (code)  Trade Offs (Residential/Commercial/Check)   
 Performance (Annual Study)

**SITING REQUIREMENTS FOR APPROVAL OF THIS PERMIT ARE AS FOLLOWS:**

MINIMUM FRONT YARD \_\_\_\_\_ MINIMUM SIDEYARD \_\_\_\_\_ MINIMUM REARYARD \_\_\_\_\_ BUFFER \_\_\_\_\_  
 SCREENING REQUIRED \_\_\_\_\_

(THESE REQUIREMENTS PER THE SPALDING COUNTY ZONING ORDINANCE)

**IN CONSIDERATION OF THE GRANTING OF A ZONING CERTIFICATE AND BUILDING PERMIT, I DO HEREBY AGREE THAT I UNDERSTAND AND WILL IN ALL RESPECTS CONSTRUCT THE WORK IN ACCORDANCE WITH ALL RULES AND REGULATIONS OF THE SPALDING COUNTY ZONING ORDINANCE. A PHOTOCOPY OF THIS APPLICATION SHALL BE VALID AS AN ORIGINAL THEREOF, EVEN THOUGH THE SAID PHOTOCOPY DOES NOT BEAR AN ORIGINAL OF MY SIGNATURE.**

\_\_\_\_\_  
**APPLICANT** \_\_\_\_\_  
**DATE**

**For office use only:**

This application for Zoning Certificate is: Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Comment \_\_\_\_\_

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Administrative Officer \_\_\_\_\_ Date \_\_\_\_\_

This application for Building Permit is: Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Comments \_\_\_\_\_

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Building Official \_\_\_\_\_ Date \_\_\_\_\_

**NOTE: BUILDING PERMIT FEE, IN ADDITION TO ANY OTHER APPLICABLE PERMITS, COVERS THE FOLLOWING: 1) CRAWLSPACE DWELLING-1 FOOTING, 1 FRAMING, AND 1 FINAL INSPECTION; 2) SLAB DWELLING-1 PLUMBING, 1 FOOTING, 1 FRAMING, AND 1 FINAL INSPECTION. IF REQUESTED, FOOTING INSPECTIONS MAY INCLUDE A TEMPORARY POWER POLE INSPECTION. A SEPARATE TEMPORARY POWER POLE INSPECTION CAN BE REQUESTED FOR AN ADDITIONAL FEE OF \$50.00. ALL OTHER INSPECTION OR RE-INSPECTION FEES ARE \$50.00.**

**A PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED.**

**THE SIGNING OF THIS PERMIT APPLICATION WILL BE CAUSE FOR A REVIEW OF THE COUNTY'S VALUE FOR THE PROPERTY IDENTIFIED HEREIN. REASONABLE NOTICE IS HEREBY PROVIDED THAT AN ONSITE INSPECTION BY A MEMBER OF THE COUNTY APPRAISAL STAFF MAY BE REQUIRED. SAID PROPERTY VISIT WILL BE FOR THE PURPOSE OF DETERMINING THE CORRECTNESS OF THE INFORMATION CONTAINED IN THE COUNTY'S APPRAISAL RECORD FOR THE PROPERTY.**