

COMMERCIAL / INDUSTRIAL BUILDING PERMIT APPLICATION

ITEMS 1-4 MUST BE COMPLETED BEFORE A COMMERCIAL/INDUSTRIAL BUILDING PERMIT WILL BE ACCEPTED.

1-SEPTIC TANK APPROVAL (New or Existing Tank) – FROM ENVIRONMENTAL HEALTH DEPARTMENT – OFFICE HOURS, Monday – Friday 8 a.m. – 9 a.m. A written approval / copy of septic tank permit is needed before a building permit can / will be issued.

2-RECORDED DEED AND PLAT – Must meet county requirements.

3-ADDRESS APPLICATION FILLED OUT – FOR 911.

4-BUILDING APPLICATION COMPLETED – permit must be submitted and approved by Code Enforcement prior to doing any work. The inspection record card must be placed in the construction box or provision made to post at the job site.

5-PLAN REVIEW – This review may take 5 business days before a permit can be issued.

6-ENERGY CODE FORM.

7-SITE PLAN- Showing new building, all structures on your property & distance of structures from each other and from all property lines.

8-DIG NUMBER – Call 1-800-282-7411 for your number.

9-ROOFING APPLICATION COMPLETED – permit must be submitted and approved by Code Enforcement prior to doing any roof work.

10-ELECTRIC APPLICATION COMPLETED – permit must be submitted and approved by Code Enforcement prior to doing any electrical work.

11-AIR CONDITIONER APPLICATION COMPLETED – permit must be submitted and approved by Code Enforcement prior to doing any HVAC work.

12-PLUMBING APPLICATION COMPLETED – permit must be submitted and approved by Code Enforcement prior to doing any plumbing work.

13-GAS APPLICATION COMPLETED – permit must be submitted and approved by Code Enforcement prior to doing any gas work.

CK # _____
REC # _____

Commercial / Industrial Building Permit Application

Property Owner's Information:

Name: _____

Current address: _____

City: _____ State: _____ Zip code: _____

Phone Number: (Daytime) _____ (Alternate) _____

Property Location:

Land Lot: _____ Land District: _____ Map: _____ Parcel: _____

Property address: _____

City: _____ State: GA Zip code: _____

Nearest intersection or address: _____

Name of subdivision (If applicable): _____ Lot number: _____

Applicant Information (If not Property Owner):

Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: (Daytime) _____ (Alternate) _____

Contractor Information:

(ATTENTION: All Contractors must provide copies of State Contractor and Business License in order to have permit applications processed.)

Contractor's name: _____

Contractor's address: _____

City: _____ State: _____ Zip code: _____

Phone Number: (Daytime) _____ (Alternate) _____

GRADY COUNTY CODE ENFORCEMENT
250 N. BROAD ST. BOX 6 ~ CAIRO, GEORGIA 39828
(229) 377-8857 FAX # (229) 377-6947

State certification number: _____ Expiration date: _____

Proposed Use? _____

Type of Building Permit Requested:

- | | | |
|----------------------------------------------------|--------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Commercial (New) | <input type="checkbox"/> Commercial (Remodel) | <input type="checkbox"/> Commercial (Addition) |
| <input type="checkbox"/> Industrial (New) | <input type="checkbox"/> Industrial (Remodel) | <input type="checkbox"/> Industrial (Addition) |
| <input type="checkbox"/> Residential (Apartment) | <input type="checkbox"/> Residential (Town Home) | <input type="checkbox"/> Residential (Condominium) |
| <input type="checkbox"/> Mixed Occupancy (Explain) | <input type="checkbox"/> Other (Explain) | |

Explanation: _____

Occupancy Classification and Group: (Check all that apply)

- | | | | | | |
|--------------------------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> Assembly | <input type="checkbox"/> A-1 | <input type="checkbox"/> A-2 | <input type="checkbox"/> A-3 | <input type="checkbox"/> A-4 | <input type="checkbox"/> A-5 |
| <input type="checkbox"/> Business | <input type="checkbox"/> B | | | | |
| <input type="checkbox"/> Mercantile | <input type="checkbox"/> M | | | | |
| <input type="checkbox"/> Educational | <input type="checkbox"/> E | | | | |
| <input type="checkbox"/> Factory-Industrial | <input type="checkbox"/> F-1 | <input type="checkbox"/> F-2 | | | |
| <input type="checkbox"/> Residential | <input type="checkbox"/> R-1 | <input type="checkbox"/> R-2 | <input type="checkbox"/> R-3 | <input type="checkbox"/> R-4 | |
| <input type="checkbox"/> High Hazard | <input type="checkbox"/> H-1 | <input type="checkbox"/> H-2 | <input type="checkbox"/> H-3 | <input type="checkbox"/> H-4 | <input type="checkbox"/> H-5 |
| <input type="checkbox"/> Institutional | <input type="checkbox"/> I-1 | <input type="checkbox"/> I-2 | <input type="checkbox"/> I-3 | <input type="checkbox"/> I-4 | |
| <input type="checkbox"/> Storage | <input type="checkbox"/> S-1 | <input type="checkbox"/> S-2 | | | |
| <input type="checkbox"/> Utility & Miscellaneous | <input type="checkbox"/> U | | | | |

Building Information: (Please fill in all pertinent information)

Total cost of construction: \$ _____

Total number of Buildings: _____

Total number of units per building: _____

Total number of units: _____

Building dimensions (Foot print): _____

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Total square footage of building:

Finished: _____ Sq ft. Unfinished: _____ Sq ft.

Total Square Footage per Floor:

Basement (Unfinished): _____ Sq ft. Basement (Finished): _____ Sq ft.
1st Floor (Unfinished): _____ Sq ft. 1st Floor (Finished): _____ Sq ft.
2nd Floor (Unfinished): _____ Sq ft. 2nd Floor (Finished): _____ Sq ft.
3rd Floor (Unfinished): _____ Sq ft. 3rd Floor (Finished): _____ Sq ft.

Number of Stories:

1 2 3

Foundation Type:

Slab Basement Crawlspace Combination

Structure Material:

Wood Concrete Brick
 Steel Block Combination

Flooring Material:

Wood Concrete Other (Explain)

Explanation: _____

Exterior Materials: (Please check all that apply)

Brick Stone Block Concrete Hardi-
 Vinyl Wood Metal Stucco Plank
 Other

Explanation: _____

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Roof Framing:

- Wood truss Wood framed Combination
 Steel truss

Roofing Material:

- Shingles Roll Metal Slate Tiles
 Concrete Roofing Membrane Other
 Wood shingles

Explanation: _____

Type of Heating System:

- Electric Heat Pump Gas Dual Fuel Solar Geo-thermal

Utilities:

Power Company:

- Grady EMC Thomasville
 City of Whigham City of Cairo

Water Supply:

- Well Public Private

Sewage:

- Septic Public Private

Existing: Approved by _____ Date: _____

Grease trap required? _____ Yes _____ No Grease trap size: _____

Report Code: _____ Type of Construction: _____ Occupancy Type: _____

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Protection:

Is building protected by sprinkler system? _____ Yes _____ No
Is building protected by fire alarm system? _____ Yes _____ No

Environmental:

Is the building within 200 feet of State Waters? _____ Yes _____ No
Is there a flood plain on the property? _____ Yes _____ No

If yes, give finished floor elevation: _____

Are there wetlands located on the property? _____ Yes _____ No

Total acreage of the property: _____

Total acreage disturbed: _____

All information is true and accurate to the best of my knowledge.

Applicant

Date

Reviewed by _____

Date _____

Approved to Issue by _____

Date _____