



Effingham County

Development Services

Building Inspections Division

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buildinginspections@effinghamcounty.org

RESIDENTIAL / MULTI-FAMILY BUILDING PERMIT APPLICATION

Shaded Area For Internal Office Use Only								
Date Received: _____		Date Issued: _____		Building Permit Number: _____			Permit Fee: _____	
Plan Review Fee:	Temporary Power Fee:	Driveway / Culvert Fee:	County Sewer Fee:	Re-Use Meter Fee:	County Water Fee:	Re-Use Fee:	Water Meter Fee:	Water Deposit Fee:
Plan Approval:		Zoning Approval:		Environmental Health		Tax Assessor:		Tax Commissioner:
Public Works:		Engineering / Flood Plain Manager:		City of Guyton:		City of Rincon:		City of Springfield:

The issuance of this permit authorizes improvements of the real property designated herein which improvements may subject such property to mechanic's and material men'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 any interests in such and to avoid encumbrances thereon, the owner or any person with an interest in such property should consider contacting an attorney or purchase a consumer's guide to the lien laws which may be available at building supply home centers. (HB1337)

Map/Parcel Number: _____ Old Map/Parcel Number: _____ Zoning: _____ Setbacks: F _____ R _____ SI _____ SS _____

Flood Zone _____ Wetlands Present: Yes _____ No _____ Power Company: _____

Project Address: _____ Plan Name: _____

Lot/Unit#: _____ Subdivision: _____ Lot Size: _____

Dwellings: _____ # Floors: _____ # Bedrooms: _____ # Baths: _____

Building Area (Sq. Ft.): _____ Heated Area (Sq. Ft.): _____ Unheated Area (Sq. Ft.): _____

Type Roofing: _____ Foundation: _____ Exterior Wall Covering: _____

Class of Work

Erect Addition Alteration Repair Remodel Other: _____

Structure Type

Single Family Residence Apartment Building #Units: _____ Condominium Complex # Units: _____ Other: _____

CONTRACTOR / OWNER INFORMATION

Owner: _____	Contractor: _____
Mailing Address: _____	Mailing Address: _____
Home Phone: _____	Contact Phone: _____
Work Phone: _____	State/Local License #: _____
Email Address: _____	Email Address: _____

Work Description <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	Project Valuation \$ _____ .00	<input type="checkbox"/> County Water/Sewer <input type="checkbox"/> County Water/Septic <input type="checkbox"/> Well/Septic <input type="checkbox"/> Private Water/Sewer System <input type="checkbox"/> City Water/Sewer
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PLEASE ATTACH THE FOLLOWING DOCUMENTS AND/OR PLANS FOR RESIDENTIAL PLAN CHECKLIST

- Site Plan, Plot Plan or Survey.....Show location of property lines, main building, accessory structures, easement widths, setback distances, septic & drain field
- Front, Rear, Right, Left Elevations.....Show maximum eave heights, ridge or parapet roof height measurements and each floor level above grade
- Footing/Foundation Plan with Footing Details.....Indicate location thicken slab or footers for interior load-bearing walls. Footer/slab section detail
- Wall Framing SectionShow detail of wall attachment to slab, roof attachment to wall with required strapping details
- Floor Framing Plan.....Indicate size, grade, span and spacing of floor joists, girders, beams and headers
- Floor Plan.....Specify room names and dimensions, window/door type, door/window headers sizes and spans, braced wall panels
- Electrical Plan Layout..... Switch, lights, receptacles, smoke detectors and panel location
- Braced Wall Plan..... Hold downs and distances
- Ceiling Joist Layout..... Spacing and span, nominal lumber sizes
- Roof / Roof Framing Plan View

*****ANY / ALL TRUSSES USED ON ANY PROJECT WILL REQUIRE ENGINEERED DRAWINGS INCLUDING LAYOUT AND BRACING*****

NOTE 1. All Drawings must be drawn to scale. All Drawings must be submitted digitally in pdf format.
2. The professional seal of an architect or engineer may be required depending on the occupancy group, building size or height of the building.

Special Conditions: _____

NOTICE: (1) Construction in some areas may impact wetlands and require a 404 Permit from the Corps of Engineers. Permit holder agrees to hold Effingham County harmless on any construction in wetlands. (2) **This permit becomes null and void if work or construction authorized is not commenced within six months, or if construction or work is suspended or abandoned for a period of six months at any time after work is commenced.** (3) **CERTIFICATE OF OCCUPANCY; Required: A new building shall not be occupied or a change made in the occupancy, nature, or use of a building or part of a building until after the Building Official has issued a Certificate of Occupancy. Such Certificate shall not be issued until all required electrical, gas, mechanical, plumbing and fire protection systems have been inspected for compliance with the technical codes adopted in section 14-36 and other applicable laws and ordinances and released by the Building Official.**

I hereby certify that I have read and examined this 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 a permit does not presume to give authority to violate or cancel to provisions of any other state or local law regulating construction or the performance of construction.

Signature of Owner, Contractor or Authorized Agent

Print Name

State Contractor License Number

Date

Revised 2/1/2019



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