



City of Locust Grove, Georgia Community Development Department

COMMERCIAL PERMIT CHECKLIST

- _____ The Applicant/General Contractor shall file with the Community Development Department six (6) sets of building plans drawn to scale on paper no smaller than 11" x 17".
- _____ Completed and signed *Commercial Permit Application*.
- _____ Completed and signed *Commercial Building Permit Routing Sheet*.
- _____ Completed and signed (by Architect or General Contractor) *Henry County Fire Department Certification*.
- _____ Proof of payment for the Water and Sewer Taps.
- _____ Payment of Plan Review Fee (equal to 50% of the Building Permit Fee).
- _____ Proof of payment of Development Impact Fees.
- _____ Proof of payment of Water and Sewer Impact Fees.
- _____ Submit valid copies of the General Contractor's State License(s), Occupational Tax Certificate (Business License), and Drivers License.
- _____ **If** your submittal includes food service, tourist accommodations, and/or public swimming pool/spa, an extra set of plans must be submitted and approved by the Henry County Environmental Health Department.

All applications must be completed in full to be accepted for processing. If you have questions, please contact the Community Development Department at 770.692.2321

I HAVE READ AND UNDERSTAND ALL OF THE ABOVE REQUIREMENTS

Signed

Date



LOCUST GROVE COMMERCIAL PERMIT APPLICATION

NEW COMMERCIAL

SHELL

TENANT FINISH

REMODELING

ADDITION

APPLICANT INFORMATION

Name: _____

Address: _____

Phone: _____

OWNER INFORMATION

Name: _____

Address: _____

Phone: _____

SITE INFORMATION

Project Address: _____

Project Name: _____ Zoning: _____

Estimated Construction Cost: _____ Total sq.ft.: _____ Heated sq.ft.: _____

Occupancy Group (circle one): A B E D F H I M R S U

Type of Construction (circle one): I II III IV V (circle one) Protect (A) Unprot. (B)

Current Building Use: _____ Proposed Building Use: _____

Setbacks: Front: _____ Rear: _____ (R) Side: _____ (L) Side: _____

Building Dimensions: Length: _____ Width: _____ Height: _____

Stories: _____ Rooms: _____ Bathrooms: _____

Applicant signature: _____ Date: _____

Plan Review Fee: _____

Building Permit Fee: _____

Development Impact Fee: _____

Water/Sewer Impact Fee: _____

Dept: _____

Due Date: _____

Purpose of Permit:

C/S for C/O	_____	C/S for C/C	_____
Shell	_____	Addition	_____
Tenant Finish for C/O	_____	Remodel	_____

LOCUST GROVE COMMERCIAL BUILDING PERMIT ROUTING SHEET

Project Name: _____

Project Address: _____ City: _____ Zip Code: _____

Type of Business: _____

Permit Owner: _____

Address: _____

Contact Person: _____ Phone #: _____

Alternate Person: _____ Phone #: _____

Submitter's Signature: _____ Title: _____

Office Use Only From This Point Forward:

Plans Received for Review: _____ Plans sent to Fire Marshal: _____

Returned from Building Dept: _____ Re-Submittal Required: Yes No Date: _____

Returned from Fire Marshall: _____ Re-Submittal Required: Yes No Date: _____

1st Re-Submittal Date: _____ 2nd Resubmittal Date: _____

Sealed Structural Plans Req. Yes No Fire Alarm Plans Req. Yes No Sprinkler Plans Req. Yes No

Occupancy Group: A B E F H I M R S U

Type of Construction: I II III IV V 1 HR (A) Unp (B)

Size of Structure: _____ Valuation Per Sq. Ft: _____ Est. Valuation: _____

Permit Cost: _____ P/R Fee (50% of Permit Cost) _____ Impact Fee: _____

Fire Safety & Accessibility Fee: _____ Fire Occupancy # _____

Development Permit Required Yes No Development Permit # _____ Date: _____

Sewer Tap Fee Required Yes No Parcel ID # _____ Zoning: _____

Water Tap Fee Required Yes No District: _____ Land Lot: _____

Septic Tank Permit Required Yes No

Pre-Construction Meeting Yes No

SET BACKS PER ZONING: FRONT _____ REAR _____ LEFT _____ RIGHT _____

COMMENTS: _____

- ___ 3 sets to Henry County Fire Dept.
- ___ 1 set to Locust Grove Building Inspector
- ___ 1 set to Henry County Tax Assessor
- ___ 1 set to Permit File



HENRY COUNTY FIRE DEPARTMENT



110 South Zack Hinton Parkway
McDonough, GA 30253
Telephone: (770) 288-6600
Fax: (770) 288-6776

Luther D. Phillips
Fire Chief

Certification

Project Name: _____

Project Address: _____

This is to certify that I have prepared these plans in conformity with the Georgia Accessibility Code 120-3-20, 2010 for making the building and facilities accessible to and usable by persons with disabilities, for the scope of work herein permitted in accordance with O.C.G.A Title 30, Chapter 3; and that the information and briefs in accordance with O.C.G.A Title 30, Code Rules 30-3-3 and 30-3-5.

This _____ day of _____, _____

Print Architect or contractor Name

Architect or contractor Signature

Architect Seal

Michael Black
Assistant Chief – Prevention

Rodney Wiggins
Assistant Chief - Training