

# Residential Building Applications and Forms

### **NOTICE**

This document is a summary of various federal, state, county, and city building construction laws and the rules and regulations. The information within is not all inclusive, nor is it designed to be, but rather presents a general overview of construction laws and processes relative to planning, permitting, constructing, inspecting, and completing a residential construction project in the City.

For the purpose of this document, the following shall apply to the use of words and phrases: Words used in present tense include future tense. Words used in singular tense include plural tense. The word "he" also means "she." The words "shall" or "must" are always mandatory. The words "may" or "can" are permissive. The word "and" indicates all conditions, requirements, or factors so connected must be met or fullfilled, whereas the word "or" indicates that at least one condition, requirement, or factor so connected must be met. The word "structure" means anything that is built and includes the word "building." The word "person" means any individual, corporation, association, firm, partnership or other legal entity. The word "permit" means written governmental permission issued by an authorized official, empowering the holder thereof to do some act not forbidden by law, but not allowed without such authorization.

If any section, subsection, sentence, clause, or phrase of this document is for any reason held to be unconstitutional, such decision shall not effect the validity of the remaining portions of this document.

As a public service, this document may be accessed and downloaded free of charge at:

www.alpharetta.ga.us

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### WATER CONSERVATION RESIDENTIAL FIXTURE SCHEDULE

Location	Fixture	Make	Model	Flow
Master Bath	Water Closet Tank			
	Water Closet Bowl			GPM
	Lavatory 1 Faucet			GPM
	Lavatory2 Faucet			GPM
	Showerhead 1			GPM
	Showerhead 2			GPM
Powder Room	Water Closet Tank			
	Water Closet Bowl			GPM
	Lavatory Faucet			GPM
GPM				
Additional Bath	Water Closet Tank			
	Water Closet Bowl			GPM
	Lavatory 1 Faucet			GPM
	Lavatory 2 Faucet			GPM
	Showerhead 1			GPM
Additional Bath	Water Closet Tank			GPM
	Water Closet Bowl			
	Lavatory Faucet			GPM
	Showerhead			GPM
Street Address:		Citv:	7in	
		,-	<del></del> ,p	
Contractor:				

#### SUBMIT FIXTURE SCHEDULE AT TIME OF BUILDING PERMIT APPLICATION

### A COPY OF STAMPED APPROVED SCHEDULE MUST BE KEPT ON JOB SITE

If fixtures shown are not on nationally published lists of high-efficiency fixtures, contractor shall furnish technical data to show fixtures do not exceed maximums: Water closets 1.3 gallons per flush, lavatories 1.5 gallons per minute, showerheads 2.0 gallons per minute. If you do not choose to use the "high-efficiency fixture" method, submit engineered calculations for alternate method.

### AFFIDAVIT – COMPLIANCE WITH GEORGIA STATE ENERGY CODE (IECC)

2015 IECC with Georgia State Supplements and Amendments for Residential Dwellings ALPHARETTA GEORGIA - INSPECTIONS & CODES ENFORCEMENT DIVISION

NOTICE: This form must be completed, signed and submitted at the time of permit application.

BUILDING PERMIT NUMBER:		DATE:
SUBDIVISION:		DATE: LOT:
CONTRACTOR/BUILDER:		
the Georgia State Supplements and Amendm establishes minimum regulations for energy-ewith this Energy Code by designers and build	nents, shall constitute the of efficient design, erection, co <u>lers is mandatory</u> . <b>All item</b> s	ternational Codes Council, when used in conjunction wi fficial Georgia State Energy Code for Buildings. This Coc onstruction, and/or alternation of all buildings. <u>Compliances</u> is shall be completely filled out. Table 402.1.4 values are on the back of this form.
I/we do certify by signature below that the abousing <u>one</u> of the following methods:	ove permitted structure sha	Il be built in compliance to the Georgia State Energy Coc
☐ GA TABLE 402.1.2 INSULATION AND FEM	NESTRATION REQUIREME	NTS BY COMPONENT (Alpharetta = Climate Zone 3).
☐ IECC UA Trade off based on Georgia Ar	mendment Table 402.1.6 (0	Climate Zone 3).
☐ RESCheck: Keyed to 2015 IECC		
☐ IECC Section 405 Simulated Performand Energy Rating Index(ERI): R406 ERI Score	ce Alternative using: REM	Rate, Energy Gauge as approved software programs.
The following are additional requirement	ents of the 2015 Energy	Code as amended by the State of GA:
☑ A permanent certificate per GA Suppleme electrical distribution panel or air handler – Se	ent to IECC 401.3 shall be ee Georgia State Suppleme of insulation, except behind	ACCA Manual D with R-8 Ducts in attics (required). readily accessible and shall be posted on or near the ents and Amendments Appendix D. tubs/showers & fireplace chase, where restrained.
Indicate with an "x" the following applicab	ole items:	
☐ Pull down/disappearing stairs in conditione	ed space weather stripped a	and U-0.20 (R-5 minimum) see: GA Amendment 402.2.4
☐ Scuttle Hole in conditioned space to attic U	J-0.05 (R-19) See GA Ame	ndment 402.2.4 Fenestration access hatches & doors
☐ Unvented/sealed crawl space complies wit	th Georgia State Suppleme	nts and Amendments 402.2.11 - Crawl space walls.
List R-value for: Flat Ceiling R =; S	Sloped Ceiling R=;	Wall Cavity R= Exterior Sheathing R=
Mass Wall (Min. R-5) R= Attic Knee	Wall (Min. R-18) R=	; Floor over unconditioned space (Min. R-19) R
Floor over outside air (Min. R-30) R	Basement conditioned?	YN Slab-on-grade?YN
Window U-factor from manufacturer NFRC La	abel:; Windo	ow SHGC from manufacturer NFRC Label:
Heating Efficiency %; Cooling Efficience	cy SEER Duct Insul	lation
Comments:		
SIGNATURE (ORIGINAL)	PRIN	TED NAME:
COMPANY NAME:	ADDRESS:	
CITY:	ZIP:	DATE:
City Staff Signature:		Date:



### ALPHARETTA RESIDENTIAL 2015 IECC COMPLIANCE TABLES

2015 IECC Table 402.1.2 - 2020 Georgia Amended

			201		I abic -	10Z. I.Z	2020 0	corgia	Anichaec	4	
	TABLE R402.1.2										
	INSULATION AND FENESTRATION REQUIREMENTS BY COMPONENT <sup>a</sup>										
Climate Zone	Fenestration <i>U</i> -Factor <sup>b</sup>	Skylight <sup>b</sup> <i>U</i> -Factor	Glazed Fenestration SHGC <sup>b,e</sup>	Ceiling <i>R</i> -Value	Wood Frame Wall <i>R</i> -Value	Attic Kneewall <i>R</i> -Value <sup>i</sup>	Mass Wall <i>R</i> -Value	Floor <i>R</i> -Value	Basement <sup>c</sup> Wall <i>R</i> -Value	Slab <sup>d</sup> <i>R</i> -Value & Depth	Crawl Space <sup>c</sup> Wall <i>R</i> -Value
3	0.35	0.55	0.27	38	13	18	8/13	19	5/13 <sup>f</sup>	0	5/13

### Equivalent U Factor Table of IECC Building Envelope Requirements for Alpharetta

	Equivalent of actor habie of iECC building Envelope Requirements for Alpharet								
	TABLE R402.1.4								
	EQUIVALENT U-FACTORS <sup>a</sup>								
Climate Zone	Fenestration <i>U</i> -Factor	Skylight <i>U</i> -Factor	Ceiling <i>U</i> -Factor	Frame Wall <i>U</i> -Factor	Mass Wall <i>U</i> -Factor <sup>b</sup>	Floor <i>U</i> -Factor	Basement Wall <i>U</i> -Factor	Crawl Space Wall <i>U</i> -Factor	
3	0.35	0.55	0.030	0.084	0.098	0.047	0.091 <sup>C</sup>	0.136	

		MINI	MUM INSU	JLATION R-VA	LUES FOR	Table R40 ENVELOPE		NTS WHEN TRADE	-OFFS ARE USED	
Climate Zone	Wood <sup>a</sup> Framed Walls	Mass <sup>a, b</sup> Wall	Attic <sup>a, c</sup> Kneewall	Basement <sup>a</sup> Wall	Crawl <sup>a</sup> Wall	Floor Over Unheated Spaces	Ceilings with Attic Space	Vaulted <sup>c, d</sup> Unvented Attic Roofline Air-impermeable	Vaulted <sup>c, d</sup> Unvented Attic Roofline Air-permeable	Cathedralized <sup>c, d</sup> Vented Ceiling Roofline Air-permeable
3	13	5	18	5	5	13	30	20	20+5*	20
Windo	Window <i>U</i> -Factor 0.5 max with SHGC 0.30 max * Air -impermeable as per IRC 806.5									

- a: Weather-stripped hinged vertical doors (minimum R-5 insulation or maximum U-0.20), weather-stripped hatches/scuttle hole covers (minimum R-19 insulation or maximum U-0.05), or weather-stripped and disappearing/ pull-down stairs (minimum R-5 insulation or maximum U-0.20) shall be deemed to meet the minimum insulation *R*-values of the corresponding envelope element.
- b: Any mass wall (masonry, CMU, etc.)
- c: Attic kneewall for the purpose of this code is defined as any vertical or near vertical wall in the building envelope that has conditioned space on one side and attic space on the other side.

Exception: When the building roofline is insulated, the former kneewall is classified as an interior wall.

d: Examples of air-impermeable insulation include spray foam and rigid foam board. Examples of air-permeable insulation include fiberglass batts and cellulose. See 'Roofline Installed Insulation Options' in Appendix RA, of these Georgia State Supplements and Amendments for details.

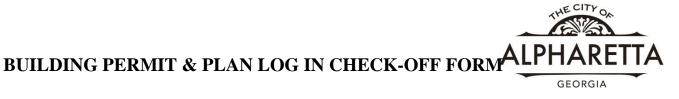
### IECC BUILDER CHECK LIST

Permit# Address	Lot	<u> </u>
☐New ☐Addition ☐Renovation ☐Basement Finish	Builder:	
Ceilings	R-Value/U-Factor	Entry or N/A
Attic Access Insulation - Minimum R-5	List R-Value	
Flat Ceiling Insulation – Minimum R-38	List R-Value	
Sloped Ceiling Insulation – Minimum R-30 – UA Trade Off Calculations Required.	List R-Value	
Walls		
Cavity Insulation – Minimum R-13	List R-Value	
Insulated Sheathing (Leave blank for OSB, Plywood, Etc.)	List R-Value	
Attic Kneewall Insulation - Minimum R-18 - Air barrier on attic side required.	List R-Value	
Fenestration		
Window U-Factor (from label) Max = U-0.35	List U-Factor	
Window SHGC (from label) Max = 0.27	List SHGC	
Skylight U-Factor (from label)	List U-Factor	
Skylight SHGC (from label) Max = 0.30	List SHGC	
Door U-Factor	List U-Factor	
Foundations		
Floor Insulation above basement floor – Minimum R-19, when basement walls not insulated.	List R-Value	
Basement Wall Insulation – Minimum R-13, when floor above not insulated or when finished.	List R-Value	
Mass Wall Insulation – Minimum R-5 @ exposed CNC/MAS walls	List R-Value	
Vented Crawl Space:		
Closed Crawl Space:		
Air Leakage		
Windows		
Doors		
Sole Plate		
Tubs/Showers		
Can Lights		
Other Penetrations		
Heating / Cooling Efficiency & Ventilation		
Gas or Propane Furnace - minimum 78% AFUE	List AFUE	
Air Conditioner – minimum 13 SEER	List SEER	
Heat Pump - minimum 7.7 HSPF	List HSPF	
Duct Insulation – Minimum R-8 in unconditioned areas – R-6 in conditioned areas	List R-Value	
Ducts Sealed with mastic or code approved tape.	List Method	
Air Intakes & Exhausts installed with dampers.		

### 2020 Georgia Residential Energy Code Compliance Certificate

This certificate shall be posted on or near the electrical distribution panel or air handler Permit # **ALPHARETTA** House Address or Community/Lot# GEORGIA **Building Summary** Contact (email/phone) **Builder Company Name** Signature Date Building Envelope (when multiple values per component, list value covering largest area) Compliance Pathway (check one) Ceiling/Roof R-value Prescriptive: R401-404 Above-grade mass wall R-value ■ UA Trade-off: R402.1.5 Sloped/vaulted ceiling R-value Cantilevered floors R-value RESCheck: Keyed to 2015 IECC Exterior wall R-value Window/Glass Door SHGC Simulated Performance: R405 Kneewall (cavity and/or continuous) R-value Window/Glass Door U-factor ■ Energy Rating Index (ERI): R406 Foundation (cavity and/or continuous) R-value Skylight SHGC **ERI Score** Floors over unconditioned R-value Skylight U-factor Mechanical Summary **HVAC Company Name** Contact (email/phone) Date Water Heating Type Heating System Type Cooling System Type Efficiency (AFUE. Efficiency (SEER. Efficiency (EF or HSPF, COP or other) EER or other) other) Gas ☐ Air conditioner ☐ Gas Heat pump Heat pump Electric Other Other: Other: ☐ Yes □No Manual J, S, D or equivalent complete? **Required Mechanical Ventilation** Type (check one) Design Rate (check one) Exhaust Continuous Design Ventilation Rate Supply Intermittent (CFM) If intermittent, list runtime in min. per hour □ Balanced Duct and Envelope Tightness Testing Summary **DET Verifier** Contact (email/phone) **DET Verifier ID** Envelope Tightness Testing (< 5 ACH50) (Envelope Tightness = Blower Door Fan Flow x 60 / Thermal Envelope Volume) Blower Door Fan Flow (CFM50) Thermal Envelope Volume (ft3) Envelope Tightness (ACH50) If multifamily unit and conducting sampling, this unit is not required to be tested. Mark N/A. Duct Tightness Testing (< 6 CFM25/100 ft<sup>2</sup>) (Total Duct Leakage = 100 x Fan Flow / Area Served) Number of Heating and Cooling Systems **Duct Tightness Leakage Test Results** System 1 System 2 System 3 f air handler and ductwork located entirely within in Conditioned space Location Fan Flow (CFM25) Area Served (ft2) Total Duct Leakage (CFM25/100 ft2)

Rough In Total (RIT) or Post Construction Total (PCT)



To help save you time when submitting applications for residential building permits, Building Plan Review has developed this form for your use. This is where you summarily tell us about your construction. Please fill in all blanks and check all appropriate boxes for each of your construction projects.

Permits canno	t be processed without this form first being completed and signed by applicants.				
Project Type?	Project Type?				
Project Addre	ss				
Name of Perso	on Submitting Application (Please Print)				
Email:					
Applicant is:	☐ Owner/Agent ☐ Contractor/Agent Telephone No:				
Y N N/A  O O O O O O O O O O O O O O O O O O O	Completed and signed City building permit application form included? City Engineering Department approved Land Disturbance Permit ('Pink Card') included? Georgia Energy Code Compliance Report? (Applies to all new dwellings and dwelling additions) Two (2) Site Development Plans included, drawn to a minimum scale of 1" = 30'? Site plans locate all property lines, setbacks, easements, buffers, and drainage structures? Site plans locate all existing and proposed buildings or structures, and their footprints? Site plans locate all existing and proposed elevated decks, steps, walks, drives, & retaining walls? Site plans show no encroachment of any setbacks, easements, or buffers? Two (2) Building Plan included, drawn no smaller than 1/8" = 1' scale? Building plans include dimensioned floor plan for each level to be improved? Floor plans show location and size of all doors, windows, and openings between rooms? Floor plans show location of water heaters, electrical panels, Furnaces / AC equipment? Floor plans show location of toilets, lavatory sinks, tubs, showers, kitchen & other sinks? Floor plans shows location of major appliances, cabinets/tops, and other built-in items? Foundation plans included showing location & structural details of floors, walls, ect.? Framing plans included showing location and structural details of floors, walls, ceilings, and roofs? Building plan shows side elevation views of exterior walls, with door/window, deck, stairs located? Building plan shows side elevations and top plan view of roof, showing roof pitch for each section? Building plan notes type and R-Rating of all exterior wall, floor, and roof insulation to be installed? Fulton County Sewer Permit (Tap) Receipt Included? (applies to all new/moved dwellings) Water Conservation Fixture Schedule				
	ion regarding encroachment of any site easement, please call the following as applicable.  Storm Drainage Encroachment: 678-297-6200  Sanitary Sewer Encroachment: 404-730-7500  Setback Encroachment Variance: 678-297-6070  Buffer Encroachment Variance: 678-297-6070				
Application S	ignature Date:				





### NEW HOUSE OR ADDITION BUILDING PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and , if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

	N – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY
Application Date:App	olicant is: Owner/Agent Contractor/Agen
PROPERTY INFORMATION	
Project Street Address:	
WORK IS: NEW ADDITION SI	NGLE FAMILY DWELLING TOWNHOUSE DUPLEX
City LDP No: Sewer Permit No:	City Impact Receipt:
PROPERTY OWNER:	Phone:
Street Address:	Suite:
City: State:	Zip:
CONTRACTOR:	Phone:
Street Address:	Suite:
City: State:	Zip:
Business Registration No:	Issued In: Expires:
Contractor License No:	State:
Qualifying Agent:	Qualify Agent No.
WORK INFORMATION Briefly Describe Work:	
Work Area Height:ft No. Stories:	Max Live Load/FL:
Heated Sqft: Unfinished Basement:	Finished Basement:
Decks Sqft: Porches Sqft:	Garage Sqft:
Foundation is: Slab-on-grade Basement Engineered Roof/Ceiling Framing Con	<u> </u>
Associated Work?	tage Mechanical Plumbing
Applicant Printed Name:	Application Signature:
Annlicant Email:	Phone:

### INTERIOR REMODEL & BASEMENT FINISH BUILDING PERMIT APPLICATION

DOES NOT APPLY TO WORK THAT CHANGES EXTERIOR WALLS OR ROOF LINES

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plan and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

ALL APPLICABLE BLANKS MUST BE FILLED IN - NO P.O. BOX ADDRESSES - PLEASE PRINT LEGIBLY

PROPERTY INFORMATION	
Project Street Address:	
WORK SITE IS SINGLE FAMILY DWELLING	TOWNHOUSE DUPLEX
Subdivision? NO YES – Subdivision Name:	
PROPERTY OWNER:	Phone
Street Address:	Suite:
City: Sta	ate: Zip:
CONTRACTOR:	Phone:
Street Address:	Suite:
City: State:	
Business Registration No: Issued In	:Expires:
Contractor License No:	
Qualifying Agent:	Qualify Agent No
WORK INFORMATION	
Work is: Basement Finish Interior Remodel Oth	ner:
Briefly Describe Work:	
Work Area Height:ft Work Area No. Stories:	
Foundation is: Slab-on-grade Basement Crawlspa	ce Other:
Heated SqFt: Unheated S	6qFt:
Associated Work?	nical Plumbing
Applicant Printed Name: Application Signature Application Signature	gnature:
Applicant Fmail:	Phone:



### SITE WALL PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and , if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

ALL APPLICABLE BLANKS MUST BE FILLED IN - NO P.O. BOX ADDRESSES - PLEASE PRINT LEGIBLY Application Date: \_\_\_\_\_\_Applicant is: Owner/Agent Contractor/Agent PROPERTY INFORMATION Project Street Address: \_\_\_\_\_ PROPERTY OWNER: \_\_\_\_\_\_Phone\_\_\_\_\_ \_\_\_\_\_ Suite: \_\_\_\_\_ \_\_\_\_\_\_ State:\_\_\_\_\_ Zip:\_\_\_\_\_ CONTRACTOR: Phone: Street Address: \_\_\_\_\_Suite: \_\_\_\_\_ City: \_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_ Business Registration No: \_\_\_\_\_\_ Issued In: \_\_\_\_\_ Expires: \_\_\_\_ \_\_\_\_\_State: \_\_\_\_\_ Contractor License No: Qualifying Agent: \_\_\_\_\_ Qualify Agent No. \_\_\_\_ **WORK INFORMATION** Briefly Describe Work: Front Setback: \_\_\_\_ Right Side Setback: \_\_\_\_ Rear Setback: \_\_\_\_ Primary Use Group:\_\_\_\_\_\_Use: \_\_\_\_\_\_ Construction Valuation for Calculating Permit Fees: \_\_\_\_\_\_ Block and Wood wall construction, where using dead-man, geo-grid, or similar stabilization methods, are subject to IBC Chapter 17-Special Inspections provisions. Submit Inspector Credentials for Building Official review at plan review submission. Applicant Printed Name: \_\_\_\_\_ Application Signature:\_\_\_\_\_

Phone: \_\_\_\_\_

Applicant Email:



### **DEMOLITION PERMIT APPLICATION**

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on the City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

ALL APPLICABLE BLANKS MUST BE FILLED IN - NO P.O. BOX ADDRESSES - PLEASE PRINT LEGIBLY Application Date: Applicant is: Owner/Agent Contractor/Agent **PROPERTY INFORMATION** Project Street Address: \_\_\_\_\_ PROPERTY OWNER: \_\_\_\_\_Phone\_\_\_\_\_ Suite: City: \_\_\_\_\_ \_\_\_\_\_\_ State:\_\_\_\_\_ Zip:\_\_\_\_\_ CONTRACTOR: \_\_\_\_\_\_Phone: \_\_\_\_\_ Street Address: \_\_\_\_\_ Suite: \_\_\_\_\_ Suite: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ \_\_\_\_\_Zip: \_\_\_\_\_ Business Registration No: \_\_\_\_\_\_\_Issued In: \_\_\_\_\_\_Expires:\_\_\_\_\_ \_\_\_\_State: \_\_\_\_\_ Contractor License No: \_\_\_\_\_ Qualifying Agent: Qualify Agent No. **WORK INFORMATION** Briefly Describe Work: Associated Work? Electrical Low Voltage Mechanical Plumbing Type of Construction:  $\Box$  1A  $\Box$  1B  $\Box$  2A  $\Box$  2B  $\Box$  3A  $\Box$  3B  $\Box$  4  $\Box$  5A  $\Box$  5B Primary Use Group:\_\_\_\_\_\_Use: \_\_\_\_\_\_ Whole Building Demolition Fee = \$300.00 **Partial Building or Structure Demolition Fee = \$200.00** Applicant Printed Name: \_\_\_\_\_ Application Signature:\_\_\_\_\_ Applicant Email: Phone:



### MODEL HOME PERMIT APPLICATION

(Complete one application per model home)

The City of Alpharetta Community Development Department permits construction of a limited number of model homes before the completion and final platting of a subdivision. The issuance of a Model Home Permit is limited to the lesser of 3 lots or 10 percent of the total lots within the development and must meet the following requirements:

Prior to Plan Submittal contact our Plan Review dept. to discuss ADA requirements 678-297-6080

To Be Completed By App	plicant (Application	ns not completed in full will be rejected and/or delayed):
Total Number of Lots in Sub	odivision	Number of Model Home Permits Requested:
Application for Model Hom	e is # of	f allowed Model Home Permits
LDP# (required)		ENG# (required)
Owner Signature		Date
Owner Name:		
Owner Phone:		
Owner Email:		
24 Hour Contact Name	<u> </u>	
24 Hour Contact Phone	e:	
Development Name:		
Development Address:	:	
Model Home Address:		
*If no address		d yet, Applicant must contact GIS Specialist at 678-297-6077 to establish an address.*
<del></del>		cation and supporting documentation.
		ownload Residential Building Permitting Procedures owing which lots within the development are proposed for model
= ''	•	card submitted with the application for a model home.
Copy of sewer	/water receipt from	າ Fulton County.
All fees including p	permit and impact fe	ees (receipt required) must be paid.
roadway	with curbing, rock b	rved by an existing approved public roadway or a new planned base, and binder coat. Attach Fire Marshal report hin 400 feet of the model home. Attach Fire Marshal report
Fire	Department: 678-29	97-6272 call for inspection between 7:30 – 9:00

A Temporary Certificate of Occupancy (TCO) must be issued by the Building Department prior to opening of a model home to sales staff or the public. **TCOs for Model Homes are strictly for sales purposes.** The City's Final Plat Checklist can be found at <a href="http://www.alpharetta.ga.us/docs/default-source/planning-zoning/final\_plat\_checklist.pdf?sfvrsn=afdef5ab\_4">http://www.alpharetta.ga.us/docs/default-source/planning-zoning/final\_plat\_checklist.pdf?sfvrsn=afdef5ab\_4</a>.

### **City of Alpharetta ELECTRICAL PERMIT APPLICATION FORM**



Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to install and use an electrical service system for a building or structure as described herein and shown on the City approved plans and specifications and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

#### ALL APPLICABLE BLANKS MUST BE FILLED IN - NO P.O. BOX ADDRESSES - PLEASE PRINT LEGIBLY

**GENERAL INFORMATION** 

Business Registration #:\_\_\_\_\_

GA Card #:

Project Name / Subdivision:PROPERTY INFORMATION	Building Permit No:
Work Site Street Address:	Lot/Suite:
Property Owner:_	Contact #:
Street Address:	
City:SUBCONTRACTOR INFORMATION	State:Zip:
Company:	Contact #:
Street Address:	Suite:
City:	State: Zip:

### **WORK INFORMATION & FEES - Minimum Permit Fee = \$50.00**

Class: \_\_\_\_\_ Expires: \_\_\_\_ Card Holder: \_\_\_\_

RESIDENTIAL				COMMERCIAL			
ITEM	NO	FEES	TOTAL	ITEM	NO.	FEE	TOTAL
<sup>1</sup> Townhouse-Whole House Electrical		\$100.00		<sup>1</sup> Apartment/Condo Whole House Electrical		\$100.00	
Temporary Power Pole		\$50.00		Temporary Power Pole		\$50.00	
<sup>1</sup> Whole House Electrical 0-		\$100.00		0-400A Service System		\$75.00	
200A Service Panel		\$100.00		401-1000A Service System		\$100.00	
0-200A Additional Panel		\$40.00 ea		1001A+Service System		\$125.00	
Service Change Out 0-200A Service Panel		\$50.00 ea		Transformers		\$5.00 ea	
Wall Outlet		\$1.00 ea		Motors		\$5.00 ea	
Switches		\$1.00 ea		Equipment Disconnects		\$4.00 ea	
Light Fixtures		\$1.00 ea		Wall Outlets		\$1.00 ea	
Ceiling Fans		\$5.00 ea		Switches		\$1.00 ea	
Exhaust Fans		\$5.00 ea		Light Fixtures		\$1.00 ea	
Appliances/Equipment		\$5.00 ea		PIU & VAV		\$5.00 ea	
Swimming Pool		\$50.00 ea		Exhaust Fans		\$5.00 ea	
Sign Electrical		\$50.00 ea		Swimming Pools		\$50.00 ea	
<sup>2</sup> Basement Finish		\$50.00 ea		Sign Electrical		\$50.00 ea	
OTHER				OTHER			
TOTAL ELECTRICAL FEES				TOTAL ELECTRICAL FEES			

Note 1: Whole House Electrical single system fees shall apply to each dwelling until. No additional category fees need be listed.

Note 2: Basement Finish Electrical single system fees shall apply to each dwelling unit. No additional category fees need be listed.

GA Card Holder Signature Dat	ate:
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### LOW VOLTAGE PERMIT APPLICATION FORM

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to install and use a low voltage system for a building or structure as described herein and shown on the City approved plans and specifications and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

#### ALL APPLICABLE BLANKS MUST BE FILLED IN - NO P.O. BOX ADDRESSES - PLEASE PRINT LEGIBLY

#### **GENERAL INFORMATION** Project Name / Subdivision: **Building Permit No: PROPERTY INFORMATION** Work Site Street Address: \_\_\_\_\_Lot/Suite: \_\_\_\_\_ \_ Contact #: \_\_\_\_\_ Property Owner: Street Address: \_\_\_\_\_State: \_\_\_\_\_Zip: \_\_\_\_\_ City: **SUBCONTRACTOR INFORMATION** \_\_\_\_\_Contact #: \_\_\_\_\_ Company: \_\_\_ Suite: Street Address: \_\_\_\_\_State:\_\_\_\_\_\_Zip: \_\_\_\_\_ \_\_\_\_\_ Issued In: \_\_\_\_ Business Registration #: \_\_\_\_\_ Class: \_\_\_\_\_ Expires: \_\_\_\_\_ Card Holder: \_\_\_\_\_ GA Card #: WORK INFORMATION & FEES - \_\_Minimum Permit Fee = \$50.00 RESIDENTIAL **COMMERCIAL** ITEM NO FEES TOTAL ITEM NO. FEE TOTAL <sup>1</sup> Townhouse-Whole House Low <sup>1</sup>Apartment/Condo Whole House \$100.00 \$100.00 ea Low Voltage ea <sup>1</sup> Single Family Whole House \$100.00 Telephone System \$50.00 ea Low Voltage First 1 thru 20 outlets Additional Phone Outlets over 20 \$1.00 ea. **Phone System** \$50.00 Data System \$50.00 ea First 1 thru 20 outlets \$50.00 ea Additional Data Outlets over 20 Data System \$1.00 ea. Security System Security System \$50.00 ea \$50.00 ea First 1 thru 20 outlets Additional Security Outlets over 20 \$1.00 ea. Fire Alarm System \$50.00 ea Fire Alarm System \$50.00 ea First 1 thru 20 outlets **CATV System** Additional Alarm Outlets over 20 \$1.00 ea. \$50.00 ea CATV System <sup>2</sup> Basement Finish \$50.00 ea \$50.00 ea First 1 thru 20 outlets Additional CATV Outlets over 20 \$1.00 ea. OTHER **OTHER TOTAL LOW VOLTAGE FEES TOTAL LOW VOLTAGE FEES** Note 1: Whole House Low Voltage fees shall apply to each dwelling until. No additional category fees need be listed. Note 2: Basement Finish fees shall apply to each dwelling unit. No additional category fees need be listed. GA Card Holder Signature:

## ALPHARETTA GEORGIA

### City of Alpharetta

### MECHANICAL PERMIT APPLICATION FORM

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to install and use a mechanical system for a building or structure as described herein and shown on the City approved plans and specifications and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

#### ALL APPLICABLE BLANKS MUST BE FILLED IN - NO P.O. BOX ADDRESSES - PLEASE PRINT LEGIBLY

Project Name / Subdivi	ision: _			Building Per	rmit ivo	D:	
	:			Lot/Sui	ite:		
Property Owner:	Contact #:						
Street Address:							
City:				State:	Zip:		
SUBCONTRACTOR INFORM	1ATION						
Company:				Contact #:			
Street Address:					Suite	2:	
City:				State:Zip: _			
Business Registration #:_				Issued In:			
GA Card #:		Class:	Expire	s:Card Holder:			
	WOR	RK INFORMAT	TION & FEES	5Minimum Permit Fee = \$5	0.00		
RESI	DENT	IAL		COMMERCIAL			
ITEM	NO	FEES	TOTAL	ITEM	NO.	FEE	TOTAL
<sup>1</sup> Townhouse-Whole House HVAC		\$100.00 ea		<sup>1</sup> Apartment/Condo Whole House HVAC		\$100.00 ea	
						1.	
<sup>1</sup> Single Family Whole House HVAC		\$100.00 ea		Heat System 1-150 M Btu		\$75.00 ea	
0 ,		\$100.00 ea \$50.00		Heat System 1-150 M Btu  Additional Heat System		\$75.00 ea \$.50 / M btu.	
House HVAC Additional HVAC System		,		·		,	
House HVAC Additional HVAC System 0-5 Ton Single System		\$50.00		Additional Heat System		\$.50 / M btu.	
House HVAC Additional HVAC System 0-5 Ton Single System Space Heater 0-150M		\$50.00 \$25.00 ea		Additional Heat System  AC System 0-5 Ton		\$.50 / M btu. \$50.00 ea	
House HVAC  Additional HVAC System 0-5 Ton Single System Space Heater 0-150M Exhaust / Dryer Vents		\$50.00 \$25.00 ea \$5.00 ea		Additional Heat System  AC System 0-5 Ton  Additional AC System		\$.50 / M btu. \$50.00 ea \$2.00 / Ton	
House HVAC  Additional HVAC System 0-5 Ton Single System Space Heater 0-150M Exhaust / Dryer Vents Misc Duct Work System		\$50.00 \$25.00 ea \$5.00 ea \$50.00 ea		Additional Heat System  AC System 0-5 Ton  Additional AC System  Space Heater		\$.50 / M btu. \$50.00 ea \$2.00 / Ton \$.20 M btu	
House HVAC  Additional HVAC System 0-5 Ton Single System Space Heater 0-150M Exhaust / Dryer Vents Misc Duct Work System Replace Furnace		\$50.00 \$25.00 ea \$5.00 ea \$50.00 ea \$50.00 ea		Additional Heat System  AC System 0-5 Ton  Additional AC System  Space Heater  Inlet / Exhaust Air System		\$.50 / M btu. \$50.00 ea \$2.00 / Ton \$.20 M btu \$.02 / cfm	
House HVAC  Additional HVAC System 0-5 Ton Single System Space Heater 0-150M Exhaust / Dryer Vents Misc Duct Work System Replace Furnace Replace Compressor		\$50.00 \$25.00 ea \$5.00 ea \$50.00 ea \$50.00 ea		Additional Heat System  AC System 0-5 Ton  Additional AC System  Space Heater  Inlet / Exhaust Air System  Misc Duct Work System		\$.50 / M btu. \$50.00 ea \$2.00 / Ton \$.20 M btu \$.02 / cfm \$50.00 ea	
House HVAC  Additional HVAC System 0-5 Ton Single System Space Heater 0-150M Exhaust / Dryer Vents Misc Duct Work System Replace Furnace Replace Compressor Fire / Smoke Dampers		\$50.00 \$25.00 ea \$5.00 ea \$50.00 ea \$50.00 ea \$50.00 ea \$4.00 ea		Additional Heat System  AC System 0-5 Ton  Additional AC System  Space Heater  Inlet / Exhaust Air System  Misc Duct Work System  Hood System - Type 1 & 2		\$.50 / M btu. \$50.00 ea \$2.00 / Ton \$.20 M btu \$.02 / cfm \$50.00 ea \$2.00 sqft	
House HVAC  Additional HVAC System 0-5 Ton Single System Space Heater 0-150M Exhaust / Dryer Vents Misc Duct Work System Replace Furnace Replace Compressor Fire / Smoke Dampers Fuel Gas Outlet		\$50.00 \$25.00 ea \$5.00 ea \$50.00 ea \$50.00 ea \$50.00 ea \$4.00 ea \$5.00 ea		Additional Heat System  AC System 0-5 Ton  Additional AC System  Space Heater  Inlet / Exhaust Air System  Misc Duct Work System  Hood System - Type 1 & 2  Chiller / Refrigerator Unit		\$.50 / M btu. \$50.00 ea \$2.00 / Ton \$.20 M btu \$.02 / cfm \$50.00 ea \$2.00 sqft \$50.00 ea	
House HVAC  Additional HVAC System 0-5 Ton Single System Space Heater 0-150M Exhaust / Dryer Vents Misc Duct Work System Replace Furnace Replace Compressor Fire / Smoke Dampers Fuel Gas Outlet		\$50.00 \$25.00 ea \$5.00 ea \$50.00 ea \$50.00 ea \$50.00 ea \$4.00 ea \$5.00 ea		Additional Heat System  AC System 0-5 Ton Additional AC System Space Heater Inlet / Exhaust Air System Misc Duct Work System Hood System - Type 1 & 2 Chiller / Refrigerator Unit Fire / Smoke Dampers		\$.50 / M btu. \$50.00 ea \$2.00 / Ton \$.20 M btu \$.02 / cfm \$50.00 ea \$2.00 sqft \$50.00 ea \$4.00 ea	
House HVAC  Additional HVAC System 0-5 Ton Single System Space Heater 0-150M Exhaust / Dryer Vents Misc Duct Work System Replace Furnace Replace Compressor Fire / Smoke Dampers Fuel Gas Outlet		\$50.00 \$25.00 ea \$5.00 ea \$50.00 ea \$50.00 ea \$50.00 ea \$4.00 ea \$5.00 ea		Additional Heat System  AC System 0-5 Ton  Additional AC System  Space Heater  Inlet / Exhaust Air System  Misc Duct Work System  Hood System - Type 1 & 2  Chiller / Refrigerator Unit  Fire / Smoke Dampers  Fuel Gas Outlet		\$.50 / M btu. \$50.00 ea \$2.00 / Ton \$.20 M btu \$.02 / cfm \$50.00 ea \$2.00 sqft \$50.00 ea \$4.00 ea \$5.00 ea	



### **City of Alpharetta**PLUMBING PERMIT APPLICATION FORM

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to install and use a plumbing system for a building or structure as described herein and shown on the City approved plans and specifications and, if same, is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

### ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY GENERAL INFORMATION

OPERTY INFORMATION				I a+/c:+.	٠.		
Nork Site Street Address: Property Owner:				Lot/Suite: Contact #:			
reet Address:					_ conta	Ct II	
				State:	Zip:		
SCONTRACTOR INFORM	ATION	<u>l</u>					
Company:				Contact #:			
Street Address:					_Suite:		
City:				State:Zip:			
Business Registration #:				Issued In:			
			s:Card Holder:				
				ESMinimum Permit Fee = \$50.00			
RESIDI	ENTIA	L		COMMER	CIAL		
ITEM	NO	FEES	TOTAL	ITEM	NO.	FEE	TOTA
<sup>1</sup> Townhouse-Whole House Plumbing		\$100.00		<sup>1</sup> Apartment/Condo Whole House Plumbing		\$100.00	
<sup>1</sup> Single Family Whole House Plumbing		\$100.00		Toilet		\$5.00 ea	
Additional ½ Bath		\$25.00		Tubs/Showers		\$5.00 ea	
Tub/ Shower		\$5.00 ea		Lavatory Sink		\$5.00 ea	
Kitchen Sink		\$5.00 ea		Kitchen / Breakroom Sink		\$5.00 ea	
Bar/ Other Sink		\$5.00 ea		Bar / Medical Sink		\$5.00 ea	
Laundry Sink		\$5.00 ea		Laundry / Mop Sink		\$5.00 ea	
Hose Bibb w/VB		\$5.00 ea		Hose Bibb x/VB		\$5.00 ea	
Floor / Hub Drain		\$5.00 ea		Floor / Hub Drain		\$5.00 ea	
Dishwasher		\$5.00 ea		Roof Drain		\$5.00 ea	
WATER HEATER		\$25.00 ea		WATER HEATER / Boiler		\$25.00 ea	
Ejector / Sump Pump		\$25.00 ea		Ejector / Sump Pump		\$5.00 ea	
Sewer Install / Repair		\$50.00 ea		Sewer Install / Repair		\$50.00 ea	
Water Install / Repair		\$50.00 ea		Water Install / Repair		\$50.00 ea	
Irrigation Meter		\$50.00 ea		Medical Gas Outlet		\$5.00 ea	
Fuel Gas Outlet		\$5.00 ea		Fuel Gas Outlet		\$5.00 ea	
Misc Fixture / Outlets		\$5.00 ea		Misc Fixture / Outlets		\$5.00 ea	
Gray Water System		\$50.00 ea		Gray Water System		\$50.00 ea	
Water Wells		\$50.00 ea		Water Wells		\$50.00 ea	
<sup>2</sup> Basement Finish		\$50.00 ea		Grease Traps MUST use Grease	Trap Ap	plication	
OTHER				OTHER			
TOTAL PLUMBING FEES				TOTAL PLUMBING FEES			

GA Card Holder Signature:	Date:
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### **State Licensing Board for Residential and General Contractors**

### **AUTHORIZED PERMIT AGENT FORM**

License verification by permitting office will be completed by visiting sos.ga.gov/plb/

Licensed Contractor: Individual Qualifying Agent
Name of licensed person
*Please attach a copy of Individual license or Company License (Reflects Company and qualifying agent license number)
License number of individual or qualifying agent:
Name of licensed company (if applicable)
License number of company (if applicable):
horoby designate
I,, hereby designate  Name of Licensed Individual or Qualifying Agent  , hereby designate
Name of person picking up permit *this person is considered authorized permit agent please attach driver's license
Copy
Copy Driver's License of Person Picking Up
Person Picking Up
to apply for and obtain the permit(s) for the project located at:  Project Address:
Troject Address:
I, the undersigned, being the contractor as either an individual or a qualifying agent, do hereby affirm and Swear, under oath, that all information on this form and on accompanying documents are true and correct.
Signature of individual or qualifying agent:
State of County of
Subscribed and sworn to before me this day of20
Signature of Notary Public (Seal)

### **CITY OF ALPHARETTA**

### AFFIDAVIT OF HOMEOWNER ACTING AS GENERAL CONTRACTOR

Address of Property		Date:
Name of Homeowner		
Work to be performed		
New house Basement Finish [		Kitchen Remodel
I, homeowner of the subject property, will be act this property. I will personally perform the work, perform the work, including framing, electrical, netc., as applicable. I will be personally providing of I will not hire or contract with any unlicensed indiconstruction trades people because I understand must have a contractor's license under Georgia Lindividual or company to perform work which, in may be unenforceable under Georgia law. I furth homeowner/contractor for the purposes of obtain personally performing or managing the work, is a remedies of law.	or I will directly hire an echanical, plumbing, direct supervision and ividual or company to that any person perfoaw. I also recognize the Georgia, requires a coer understand that knowing a building permit misdemeanor and management of the company of the compan	nd pay the individual trades to roofing, siding, drywall, painting, management of all trades.  obtain, manage, or supervise the rming these management tasks at if I contract with an unlicensed entractor's license, such contract owingly representing that I will be when in fact I will not be any result in fines or other
I will personally perform the work, or I will direct (as applicable), as itemized on the attached sched		owing individuals or companies
I, the undersigned, do hereby affirm and sw and on accompanying documents is true and		t all information on this form
Signature		
State of	County	of
Subscribed and sworn to before me this	day of	, 20
Signature of Notary Public		(Seal)