



City of Covington

BUILDING PERMIT APPLICATION

PLEASE COMPLETE THE BELOW INFORMATION. INCOMPLETE APPLICATIONS WILL BE RETURNED.

Date Received: _____

Received By: _____

Permit No.: _____

Fee/invoice.: _____

I. REQUIREMENTS:

- 2 full sets of stamped building plans on 24" x 36" paper (including site layout plan, Tree Preservation Plan, backflow protection device and grease trap – if applicable)
- 1 separate set of electrical plans (non-residential projects)
- 1 separate set of gas plans (non-residential projects)
- 1 set of plans on CD in .pdf format (non-residential projects)
- 1 set of digital plans

For the general contractor and all subcontractors submit the following:

- Signed affidavit Copy of state license Copy of business license Copy of driver's license
- A non-refundable commercial plan review fee of \$250.00 or a non-refundable residential plan review fee of \$75.00

II. APPLICANT INFORMATION:

Name: _____

Address: _____

Phone: _____ Email: _____

Applicant is: Property Owner General Contractor Business Owner/Tenant
 Architect/Engineer Other _____

Signature: _____ Date: _____

III. PROJECT INFORMATION:

Project Address: _____ Project Name: _____

Tax ID: _____ Parcel Size (Acres): _____

Zoning District: _____

Scope of Project: _____

Permit Type: Residential Commercial Industrial Other

Project Type: New Construction Interior Build/Remodel Exterior Remodel Basement Finish
 In Ground Pool Shell Only Other _____

New Construction:

of bedrooms: _____ # of full baths _____ # of half baths _____ detached ___ attached ___ garage

Project Cost/Valuation (excluding land cost): _____



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Total Square Footage: _____

Intended Use of Structure(s): Single Family House Multifamily House Apartment
 Retail Restaurant Professional Other _____

Building Height: _____ Number of Levels: _____

Will a temporary power pole be needed? yes no Fire Sprinkler System Provided? yes no

Is the property located within a historic district? yes no

If yes, applicant must also submit proof of a Certificate of Appropriateness.

IV. CONSTRUCTION TYPE – IBC TABLE 503:

- Type I **(Fire Resistive)** concrete and steel structure (including roof)
 - Type II **(Non-Combustible)** steel or concrete walls – similar to Type I but roof material is combustible
 - Type III **(Ordinary – Brick and Joist Structure)** masonry bearing walls with floors, structural framework and roof made of wood or other combustible material
 - Type IV **(Heavy Timber)** masonry wall similar to Type II but interior consist of heavy timber
 - Type V **(Wood Frame)** interior and exterior walls are wood framed
- Exterior Building Material: Brick Stone Stucco/EIFS Other _____
- Roofing Material: Metal Asphalt Other _____

V. GENERAL CONTRACTOR INFORMATION:

Contractor Business Name: _____

Address: _____

Qualifying Agent Name: _____

State License Number: _____ Expiration Date: _____

License Type: General Contractor General Contractor-limited tier Residential Basic
 Residential/Light Commercial

Address: _____

Phone: _____ Email: _____

Primary Contact for Project: _____ Phone: _____

VI. GEORGIA LICENSED SUBCONTRACTOR INFORMATION:

Electrical Contractor:

Signed affidavit

SUBCONTRACTOR INFORMATION:

Business Name: _____ Phone: _____



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License Holder: _____ Email: _____

State License Number: _____ Expiration Date: _____

Business Address: _____ City: _____ State: _____ Zip: _____

SIGNATURE:

By signing below, I agree that I am the licensed contractor listed on the affidavit and responsible for my trade at this project location

Signature: _____ Date: _____

Print: _____

- Copy of state license
- Copy of business license
- Copy of driver's license

Plumbing Contractor

- Signed affidavit

SUBCONTRACTOR INFORMATION:

Business Name: _____ Phone: _____

License Holder: _____ Email: _____

State License Number: _____ Expiration Date: _____

Business Address: _____ City: _____ State: _____ Zip: _____

SIGNATURE:

By signing below, I agree that I am the licensed contractor listed on the affidavit and responsible for my trade at this project location

Signature: _____ Date: _____

Print: _____

- Copy of state license
- Copy of business license
- Copy of driver's license

Mechanical Contractor

- Signed affidavit

SUBCONTRACTOR INFORMATION:

Business Name: _____ Phone: _____

License Holder: _____ Email: _____

State License Number: _____ Expiration Date: _____

Business Address: _____ City: _____ State: _____ Zip: _____



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SIGNATURE:

By signing below, I agree that I am the licensed contractor listed on the affidavit and responsible for my trade at this project location

Signature: _____ Date: _____

Print: _____

- Copy of state license
- Copy of business license
- Copy of driver's license

Low Voltage Contractor

- Signed affidavit

TRADE:

Alarm Sprinkler Other _____

SUBCONTACTOR INFORMATION:

Business Name: _____ Phone: _____

License Holder: _____ Email: _____

State License Number: _____ Expiration Date: _____

Business Address: _____ City: _____ State: _____ Zip: _____

SIGNATURE:

By signing below, I agree that I am the licensed contractor listed on the affidavit and responsible for my trade at this project location

Signature: _____ Date: _____

Print: _____

- Copy of state license
- Copy of business license
- Copy of driver's license



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I do hereby certify that I am responsible for each required licensed subcontractor to hold a current Georgia subcontractor license and local business license where the business is located from. It is my sole responsibility to notify the City of Covington Planning and Zoning Department in writing of any change in the status of myself as the contractor or any subcontractor performing work listed on this page. Any false information or representation will be prosecuted under all applicable laws and ordinances.

General Contractor: _____ Date: _____

Sworn to and subscribed before me on this _____ day of _____, 20__

Notary: _____

Notary Seal

VII. PROPERTY OWNER AFFIDAVIT:

I, _____, the owner of the subject property identified in this

application, do hereby authorize _____ to act on my behalf in all matters pertaining to the processing and approval of this application, including modifying the project accordingly to the terms and conditions set forth by the City of Covington. I agree to be bound by all representatives and agreements made by my designated representative. If this relationship changes at any time prior to the completion of this project, it is my sole responsibility to notify the City of Covington Planning and Zoning Department of said change in writing.

Name of Property Owner(s): _____

Mailing Address: _____

Phone: _____ Email: _____

Signature of Owner: _____ Date: _____

Sworn to and subscribed before me on this _____ day of _____, 20__

Notary: _____

Notary Seal



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NO PERMIT WILL BE ISSUED UNTIL THE PROPERTY OWNER AFFADAVIT IS SIGNED

NO INSPECTION WILL BE PERFORMED UNTIL THE SUBCONTRACTOR AFFIDAVIT IS COMPLETED AND ON FILE.

PRIOR TO THE CERTIFICATE OF OCCUPANCY BEING ISSUED FOR NON-RESIDENTIAL CONSTRUCTION, THE APPLICANT SHALL PROVIDE THE FIRE MARSHAL AND BUILDING INSPECTOR A COPY OF THE FINAL APPROVED PLANS IN .PDF FORMAT. THESE FILES MAY BE DIRECTLY EMAILED TO THE RECIPIENTS.

**** FOR OFFICIAL USE ONLY ****

PLANNING AND ZONING		File #	Fee Received: <input type="checkbox"/>
<input type="checkbox"/> Approved _____ <input type="checkbox"/> Denied _____	<input type="checkbox"/> Approved with remarks	Is this property located within Covington's Historic District? <input type="checkbox"/> Yes, <input type="checkbox"/> No	