RESIDENTIAL NEW HOME PERMIT PACKET
CHECKLIST

Please complete the entire application package, including:

- **Permit Details Form**
  
  **State Licensing Board Authorized Permit Agent Form** – Required if using a licensed contractor (must be original with copies of current business license and state contractor’s license attached) Please do not include copies of driver’s license.

- **Affidavits**
  
  Contractor Affidavits – Required. (Must be signed, notarized and submitted with building permit application with copies of current business license, state contractor license). Please do not include copies of driver’s license.
  
  - Electrical Sub-Contractor Affidavit
  - Mechanical Sub-Contractor Affidavit
  - Plumbing Sub-Contractor Affidavit

  **OR**

  Self Work Affidavit (if applicable – will be signed at building permit submittal)

- **Site Plan** – Scale drawing 1 copy 11 x 17 (see residential site plan requirements).

- **Plat** – Copy of approved recorded plat

- **Septic Tank Permit** – Required if on septic. Obtain at Forsyth County Environmental Health Department (770-781-6909) prior to applying for building permit.

- **Temporary Toilet** – Required obtain Forsyth County Environmental Health Department (770-781-6909) prior to applying for building permit.

- **Sewer** – proof of purchase if not on septic

- **Water Meter Purchase** – proof of purchase required (if water supplied by well clerk to provide affidavit).

- **Lot Grading Plan (LGP)** – if applicable

- **Fees** – See Forsyth County Website for fee schedule under Planning and Community Development Department. Accepted forms of payment Visa/ MasterCard, check, or cash.

- **Impact fees**: Required for all new homes. Fee schedule can be found on the Forsyth County website under the Finance Department. Accepted form of payment Visa /MasterCard, check or cash. Payment must be separate to permit fees.
Setbacks should always be shown to closest point to property line and separation should be to closest point on both structures.

NOTE:
SETBACK DIMENSIONS ARE TO FOUNDATION WALLS, OVERHANGS CONSIDERED 1.0' UNLESS OTHERWISE NOTED.
SEE ZONING CONDITION #16 FOR EXTERIOR FINISH.
FRONT SETBACK - 25'
SIDE SETBACK - 5'
(20' BETWEEN STRUCTURES)
REAR - 50' EXTERIOR
R.O.W. - 50'
BUFFERS - NONE
EASEMENTS - 20' DE 20' DE

ZONED - RES 3
NOTE: INFORMATION FOR THIS PLAT TAKEN FROM FINAL PLAT OF SENECAL OVERLOOK
PB 170 PG 115-123

ARCHITECTURAL REQUIRED: if applicable
CHARACTER AREA: Etowah
CHARACTER NODE: (if applicable)
BUILDING HEIGHT:
MINIMUM SQUARE FOOTAGE: (required through zoning conditions)

TREE REQUIREMENT: Should be what is on final plat or in zoning conditions.

OWNER/DEVELOPER

AREA TABULATION
FRONT PORCH 104 SF
FRONT STEPS 12 SF
GARAGE 463 SF
DECK 192 SF
PATIO UNDER 192 SF
DECK STEPS 60 SF
TOTAL HEATED 3,784 SF

GRAPHIC SCALE
1"=20'

0 20 40 60

DATE SURVEYED: 6-7-18
SURVEYED BY: LRB

JOB NUMBER: 2604
GENERAL INFORMATION

Included in this permit packet is a sample site plan with the requirements to be met.

When installing an irrigation system, you are required to have a licensed plumbing contractor if connecting to an existing water supply line. Backflow protection and rain sensor will be verified at time of Final Plumbing inspection.

RESIDENTIAL SITE PLAN REQUIREMENTS

A house location plan is required for any proposed residential building or structures, any proposed addition to an existing residential building or structure, any proposed residential accessory building or structure, including swimming pools and retaining walls. The following information is required to be on site plan.

a. Property lines with dimensions
b. Location and names of all abutting streets and rights of way
c. Minimum required front, side and rear building setback lines with dimensions
d. The approximate outline of all proposed and existing buildings and structures including projections such as fireplaces, bay windows, porches, patio’s deck’s, stairs.
e. The approximated outline of all driveways, walkways, swimming pools, retaining walls, and other improvements proposed or existing.
f. Outline of roof overhangs will need to be shown dimensions of overhangs must be listed. (Overhangs cannot encroach into easements, nor buffers).
g. Dimensions of building and distances between all structures and the nearest property lines. Dimensions of all projections including bay windows, fireplaces, porches, decks, and eaves.
h. Location and dimension of all floodplain limits, buffer requirements, and all drainage or any other easements.
i. Subdivision name, lot number, street address and zoning.
j. Required zoning conditions for separation between buildings on adjacent lots specifying where measurement is taken from wall to wall, foundation to foundation, eave to eave, roof overhang to roof overhang, etc.
k. Any and all other zoning requirements of the zoning approval, square footage requirements, garage single double etc.
l. Finished Area of home, unfinished area such as basements, porches, decks, patios, etc.
m. Height of structure see UDC (Unified Development Code Chapter 3 Building Height Definitions)

Height of Structure:
Unified Development Code :Chapter 3 Building Height Definitions
(Unified Development Code: Chapter 11 Table 11.2a and Table 11.2b).
Agricultural Zoning:
(Unified Development Code Chapter 15 Table 15.2)
# FORSYTH COUNTY - RESIDENTIAL NEW HOME PERMIT APPLICATION

## PROPERTY ADDRESS INFORMATION

Site Address: ________________________________  City/State/Zip: ________________________________

Directions to job site:
(Copy of map quest directions accepted leaving from 110 East Main St to destination)

Subdivision Name and Lot # (if applicable):

## CONTRACTOR INFORMATION (if applicable)

Forsyth County Business License / Registration #: __________________  GA State License #: __________________

Business Name: _________________________________________________________________

Email: __________________________________________  Phone#: ______________________________

## OWNER INFORMATION

Last Name: __________________________  First Name: __________________________

Address: __________________________  City/State/Zip: __________________________

Email: __________________________________________  Phone: ______________________________

## PROJECT INFORMATION

Description of work: ________________________________________________________________

Utility Company: Sawnee EMC_____ GA Power ______

**FLOOR AREA:** (please use square footage)

Finished Floor Area (floors 1-3): ______  Garage: ______  Porch: ______  Deck: ______  Patio: ______

Finished Basement: ______  Unfinished Basement: ______  Storage: ______  Other: ______

Total # of Bedrooms: ________  Total # of Bathrooms: ______

Height: ______ feet  Stories: 1 __ 2 __ 3  Number of Buildings/Units: ______

(Unified Development Code: Chapter 3 Building Height Definition)

Will Irrigation be installed: ___Yes ___No

Sewer System: Septic: (Health Dept. Permit #:______________________)  County ___ City ____Private

Water System: County: (Water Meter #:______________________)  City ___ Well ___Private

Total disturbed acreage associated with this permit and the disturbed acreage for any adjacent permits that will be disturbed at the same time: **If you are disturbing an acre an LGP may be required.**

Total Acreage: __________________________  Disturbed Acreage: __________________________
The undersigned states that the above information is true and correct, understands that the permit issued is only for the construction as stated and that occupancy is not permissible until all inspections and code requirements are met and a Certificate of Occupancy has been issued by Forsyth County.

Applicant’s Name (if applicable): __________________________________________

Applicant’s Signature (if applicable): ___________________________________ Date

Property Owner’s Name: ___________________________________________

Property Owner’s Signature: ___________________________________ Date

All site plans and permit cards are to remain onsite until a Certificate of Occupancy has been obtained.

**NO STRUCTURES OF ANY TYPE SHALL BE INSTALLED OR CONSTRUCTED WITHIN ANY EASEMENT**

**Height of Structure:**
Unified Development Code: Chapter 3 Building Height Definitions

**For Residential Zoning:**
(Unified Development Code: Chapter 11 Table 11.2a and Table 11.2b).

**For Agricultural Zoning:**
(Unified Development Code Chapter 15 Table 15.2)

Vinyl Exterior material of any kind prohibited in all major subdivisions
(Unified Development Code Chapter 11-9.3)

**The issuance of a building permit does not assure that the building setbacks have been met or that the structure does not encroach on any easement, or buffer. The owner and/or permit holder have the sole responsibility of determining compliance with setbacks and Non-Encroachment of easements and buffers. **
Licensed Contractor: _____ Individual  _____Qualifying Agent

Name of Licensed Person: __________________________________________________________
Please attach a copy of Individual License or Company License

License Number of Individual or Qualifying Agent: __________________________________
Please attach copy of Qualifying Agent License

Name of Licensed Company (if applicable): _____________________________________________

License Number of Company (if applicable): ___________________________________________

I, ____________________________ hereby designate _________________________________________ (Licensed Individual or Qualifying Agent)

___________________________________________________________________
to apply for and obtain permits.

AUTHORIZED SIGNATURE

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 me before me this ______ day of ______, 20_______

Notary Public Signature Seal
ELECTRICAL SUB-CONTRACTOR AFFIDAVIT

Site Address: ____________________________________________________________

This is to certify that I am responsible for the **Electrical** installation and compliance with all applicable codes. I understand that Forsyth County requires Temporary Power Connection to Service Utilities before final inspection. I relieve Forsyth County and its Inspectors from any liability for damages or loss of property or improper installation.

________________________________________________________________________

Company Name

Forsyth County License or Registration #

Licensed Electrical Contractor Signature

State License #

Notary Public Signature and Stamp

Date
MECHANICAL SUB-CONTRACTOR AFFIDAVIT

Site Address: ____________________________________________________________

This is to certify that I am responsible for the Mechanical installation and compliance with all applicable codes. I relieve Forsyth County and its Inspectors from any liability for damages loss of property or improper installation.

Company Name ______________________________ Forsyth County License or Registration # ___________________________

Licensed Mechanical Contractor Signature ______________________________ State License # ___________________________

Notary Public Signature and Stamp ______________________________ Date ___________________________
PLUMBING SUB-CONTRACTOR AFFIDAVIT

Site Address: __________________________________________

This is to certify that I am responsible for the Plumbing installation and compliance with all applicable codes. I assume all responsibility and liability for the installation of the building sewer and water lines. I understand that it is my responsibility to insure that the sewer and water lines are installed in compliance with the Georgia Minimum Plumbing Code and any local ordinances. Ordinances may be obtained from Forsyth County/City of Cumming.

I also understand that Forsyth County/City of Cumming requires a cleanout at sewer tap. I relieve Forsyth County/City of Cumming and its Inspectors from any liability for damages loss of property or improper installation.

__________________________________________
Company Name

__________________________________________
Forsyth County License or Registration #

__________________________________________
Licensed Plumber Signature

__________________________________________
State License #

__________________________________________
Utility Contractor Signature (if applicable)

__________________________________________
Notary Public Signature and Stamp

__________________________________________
Date

When installing an irrigation system if connecting to an existing water supply line backflow protection and rain sensor will be verified at time of Final Plumbing inspection.