



CITY OF MCRAE-HELENA EST. 2015

CITY OF MCRAE-HELENA
 25 S 1ST AVENUE
 McRae-Helena, Georgia
 Phone: (229) 868-6051
 Fax: (229) 868-2747
 www.mcrae-helena.org

RESIDENTIAL BUILDING PERMIT APPLICATION

Site Address:	Suite/Unit #:	Zip:
Development/Center:	<input type="checkbox"/> Single Family Detached	<input type="checkbox"/> Townhome <input type="checkbox"/> Duplex

PROPERTY

Tax Parcel # _____ - _____ - _____ - _____	Zoning District:	
Property Owner:	Phone:	
Contact Name:	E-mail:	
Address:	Suite #:	
City:	State:	Zip:

GENERAL CONTRACTOR

Company Name:	Phone:	
Contact Name:	E-Mail:	
Address:	Suite #:	
City:	State: Zip:	
State License # Individual: <input type="checkbox"/>	Expires:	Business License #:
Company State License #:	Expires:	

APPLICANT

Applicant is: <input type="checkbox"/> General Contractor	<input type="checkbox"/> Authorized Permit Agent	<input type="checkbox"/> Architect/Engineer
Applicant's Name:	Phone:	
Company Name:	E-Mail:	
Address:	Suite #:	
City:	State: Zip:	

ASSOCIATED CONTRACT WORK:

Electrical Contractor:	Address:	Phone:
State License Number:		City License Number:
Plumbing Contractor:	Address:	Phone:
State License Number:		City License Number:
Mechanical Contractor:	Address:	Phone:
State License Number:		City License Number:

WORK INFORMATION

Work Area:	SF	Occupancy Type:	Building Height: FT	No. Stories:	
<input type="checkbox"/> New Residence	<input type="checkbox"/> Garage / Carport	<input type="checkbox"/> Building Use Change			
<input type="checkbox"/> Addition	<input type="checkbox"/> Porch / Pergola / Patio Cover	<input type="checkbox"/> Land Use Change			
<input type="checkbox"/> Interior Alteration/Use Change	<input type="checkbox"/> Deck	<input type="checkbox"/> Mobile Home			
<input type="checkbox"/> Basement Finish	<input type="checkbox"/> Shed / Storage	<input type="checkbox"/> Other _____			
Describe Work to be Performed:					Valuation:
					\$ _____
					Permit Fee:
					\$ _____



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***PLANS MUST BE FURNISHED FOR REVIEW ON ALL CONSTRUCTION.*PLEASE NOTE A CERTIFICATE OF OCCUPANCY MAY BE REQUIRED WITH FINAL INSPECTION OF PROJECT.**

NOTE: IF NO SUBSTANTIAL CONSTRUCTION PROGRESS HAS BEEN MADE WITHIN 180 DAYS OF THE DATE OF ISSUANCE OF THE BUILDING PERMIT, SAID PERMIT THEN BECOMES INVALID.

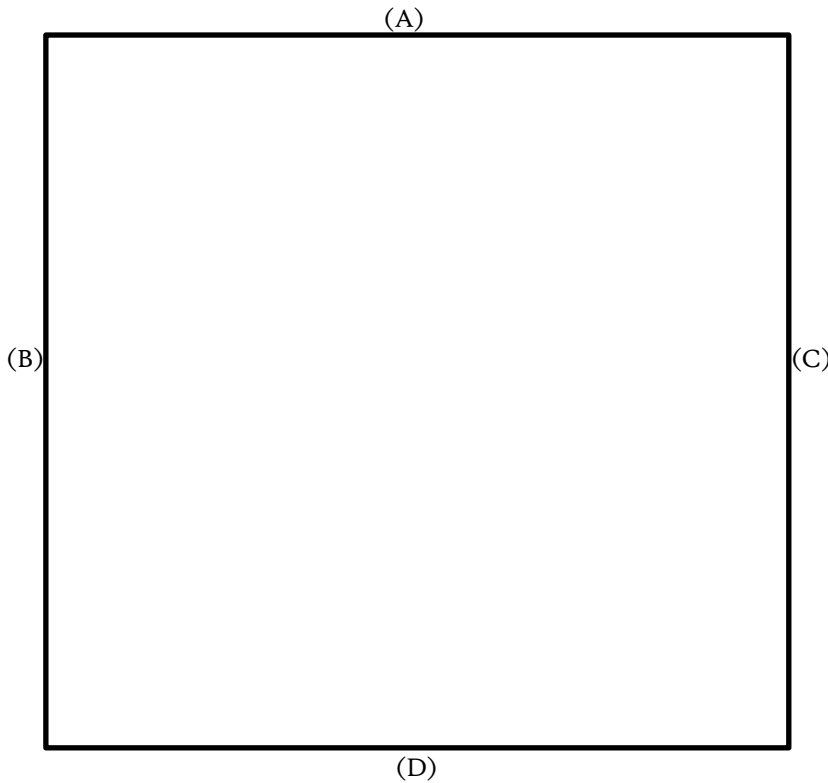
Applicant Signature: _____ Date: _____

GENERAL CONTRACTOR, PROPERTY OWNER, OR ENGINEER/ARCHITECT MUST COMPLETE THIS FORM WHEN APPLYING FOR A BUILDING PERMIT FOR A NEW STRUCTURE, ADDITION, MOBILE HOME PLACEMENT OR RELOCATION.

DO NOT BEGIN ANY CONSTRUCTION OR LAYOUT PRIOR TO PERMIT BEING ISSUED. PLEASE CHECK WITH BUILDING INSPECTOR AS OTHER REQUIREMENTS MAY APPLY.

DATE _____ OWNER _____ PHONE () _____

PLEASE INCLUDE A DETAILED ILLUSTRATION OF WORK TO BE PERFORMED BELOW:



SQUARE FOOTAGE OF LIVING AREA OR FLOOR AREA _____ FT²

LOT SIZE IN FEET: WIDTH _____ FT. DEPTH _____ FT.

PLEASE LIST ALL DIMENSIONS AS REQUIRED BELOW:

DISTANCE IN FEET: (A) _____ FT. (B) _____ FT. (C) _____ FT. (D) _____ FT.

PLEASE INCLUDE ALL STREET NAMES IN ILLUSTRATION AS RELATED TO LOT.

FRONTAGE STREET NAME _____



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I _____, UNDERSTAND THAT THIS BUILDING PERMIT APPLICATION IS NOT APPROVED UNTIL THE BUILDING INSPECTOR OR EQUIVALENT HAS CHECKED FOR CONFORMITY WITH THE PROVISIONS WITHIN THE ZONING ORDINANCE OF THE CITY OF MCRAE-HELENA, GA (REV. JAN22,2015) AND APPLICATION IS SIGNED BY THE AUTHORIZING CITY OFFICIAL.

I FURTHER UNDERSTAND THAT ANY WORK DONE OR ACTION TAKEN BY ME OR BY ANYONE ON MY BEHALF, PRIOR TO FORMAL APPROVAL OF THIS APPLICATION WILL VOID APPLICATION FOR LENGTH OF TIME REQUIRED FOR REVISION AND/OR DENIAL BY AUTHORIZING CITY OFFICIAL.

SIGNED _____

WITNESSED _____

DATE _____

OFFICE USE ONLY

APPROVED: _____

DENIED: _____

REASON _____

PAID PERMIT DATE: _____

PERMIT NUMBER: _____

BUILDING INSPECTOR/ CODE ENFORCEMENT OFFICER

DATE

CITY MANAGER

DATE



CLEAN WORK AREA DISCLOSURE

This is to certify that I understand, as a contractor applying for this building permit, I am responsible for removing all trash and debris from the job site.

Signature of Contractor

This is to certify that I understand, as a homeowner or designated agent applying for this building permit, I am responsible for letting the contractor know that all trash and debris from the jobsite must be removed by them.

Signature of Homeowner