

City of Athens
Building Department
Athens, TN



Application for
Building Permit

IMPORTANT PLEASE COMPLETE ALL QUESTIONS:

Location Information:

Project Address: _____ . Zoning District of Property: _____
FEMA Flood Zone Type: _____ . Tax map Parcel ID #: _____
Lot Size: _____ . Lot Shape: _____ Lot #: _____

Owner Information:

Owner Name: _____ . Contact Number: _____
Current Address: _____

Contractor Information:

Contractor or Company Name: _____
Contractor or Company Address: _____
Contact person: _____ . Contact Number: _____
License Type: _____ . License Number: _____ Expiration Date: _____

Please attach a copy of your current license and certificate of insurance showing workers comp. and liability.

Construction Information:

Type of improvement: New: _____ Addition: _____ Remodel: _____ Moving: _____ Demolition: _____
Type Building: Single Family: _____ Multi Family: _____ Commercial: _____ Industrial: _____ Manufactured: _____
Square Footage of Structure: _____ Number of Stories: _____ Total Height: _____
Building Setback from property lines: Front: _____ Side: _____ Rear: _____
Describe the construction project: _____

CONSTRUCTION COST:

Cost of the construction: _____ Cost of Electrical: _____ Cost of Plumbing: _____
Cost of HVAC: _____ Cost of site work: _____ Cost of Landscape: _____
TOTAL COST OF PROJECT: _____

APPROVALS:

Has Construction Plans been submitted: _____	Have they been Approved: _____
Has Site Plans been submitted: _____	Have they been Approved: _____
Has Landscape Plans been submitted: _____	Have they been Approved: _____
Has Driveway Plan been submitted: _____	Have they been Approved: _____
Has this been to Planning Commission If required: _____	Did it receive Approvals: _____
Has it been to Board of Zoning Appeals If required: _____	Did it receive Approvals: _____

OFF STREET PARKING:

Is off street parking provided: _____ Number of Spaces: _____ Size of spaces: _____
Number of ADA Compliant Spaces: _____ Width of Drive Lanes: _____

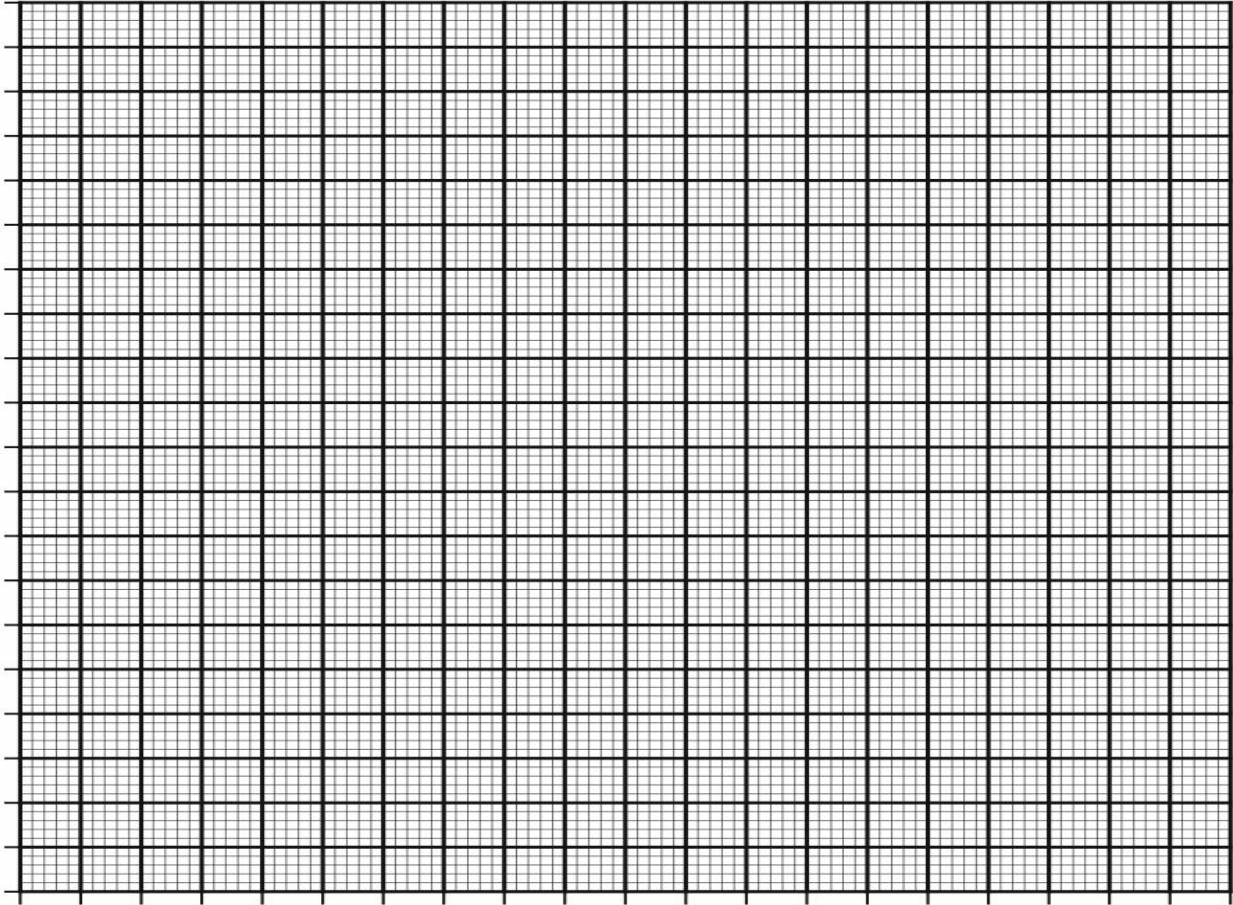
Signature of Owner or Contractor: _____

OFFICE USE:

APPROVED BY: _____ DATE: _____

**SITE PLANS
FOR RESIDENTIAL USE**

**SKETCH THE PROPERTY AND ANY STREETS AND SHOW THE LOCATION OF ALL STRUCTURE TO BE LOCATED ON THE PROPERTY
SHOW ALL SETBACK AND LOT MEASUREMENTS.**

A large grid for sketching site plans. The grid consists of 20 columns and 20 rows of small squares, with a larger square grid overlaid on top. The grid is intended for drawing property boundaries, structures, and setbacks.

I HEREBY CERTIFY THAT ALL STATEMENTS ON THIS APPLICATION TO THE BEST OF MY KNOWLEDGE AND BELIEF ARE CORRECT.

Owner or Representative Name (please print)

Signature

Date

Failure to complete all the questions on this application could result in delaying the permit process or rejection of the application.

Flood zone information can be obtained from the City of Athens Community Development Department.



IMPORTANT PLEASE COMPLETE QUESTIONS:

Description of Project: _____
Type of Project (check one) New Construction: _____ Renovation: _____ Addition: _____

Project Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Project Owner: _____
Contact Person: _____ Phone #: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Project Architect / Engineer: _____
A/E Firm: _____
Contact Person: _____ Phone #: _____
Address: _____
City: _____ State: _____ Zip Code: _____

SPRINKLER CONTRACTOR: _____
Contact Person: _____ Phone #: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Construction Start (approximate date): _____ Construction Completion: (estimated date): _____

Occupancy Type (as defined by the IBC): _____
Construction Type (as defined by the IBC) CHECK ONE: **IA** ___ **IB** ___ **IIA** ___ **IIB** ___ **IIIA** ___ **IIIB** ___ **IV** ___ **VA** ___ **VB** ___

One Hour Protected: Yes: ___ No: ___ Sprinkled: Yes: ___ No: ___ Height: _____ Number of Stories: _____

Building Area (as defined by the IBC)

New Construction: _____ largest floor Sq. Ft.	Existing Construction: _____ largest floor Sq. Ft.
Total (all floors): _____ Sq. Ft.	Total (all floors): _____ Sq. Ft.
	Existing Building construction Type: _____

I hereby certify that, to the best of my knowledge and belief the total construction cost for this project will be:

Estimated Construction Cost: _____ ***Review Fees Due:*** _____

Owner or representative name (please print) **Signature** **Date**

Fees can be found under BUILDING VALUATION TABLE & REVIEW FEES, on the City of Athens web site.