



City of Acworth
Community Development Department

4415 Senator Russell Avenue
Acworth, Georgia 30101
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Fax: (770) 974-4421
www.acworth.org

RESIDENTIAL REMODELING PERMIT APPLICATION

All contractors are required to have a Georgia Contractor's License and a business license from a Georgia municipality!

*Note: A separate permit is required for each and every building or structure on which work is to be done. If building contains more than (1) dwelling unit, list the addresses of all units in which work will be done.

Expiration of Permits: All permits expire 6 months after the last required inspection that has been passed, or 6 months after the date of issue if no required inspections have been approved. The Building Official may issue a 6 month extension if any permit, (for due cause), if requested in writing by the permit holder prior to such a permit expiring.

MASTER PERMIT # (If known) _____

Location / Street Address: _____

Subdivision / Complex: _____ Lot / Apt. #: _____

Owner Name: _____ Phone: _____
Address: _____ Mobile: _____
City: _____ State: _____ Zip: _____ Fax: _____

Contractor: _____ Phone: _____
Address: _____ Mobile: _____
City: _____ State: _____ Zip: _____ Fax: _____

Electrical Utility Provider (If known): Acworth Power () GA. Power () Cobb EMC ()

TOTAL VALUATION OF CONSTRUCTION \$ _____ TOTAL SQUARE FOOTAGE _____

NOTE: The "CONSTRUCTION VALUATION" is the Turn Key cost of the entire job, including architectural and design fees, all site work necessary for the building (including utility lines), materials, labor, overhead and profit for all trades.

BASE FEE: _____ \$ \$50.00
PERMIT COST: \$5.00 per \$1,000 (or any portion thereof) OF TURN KEY VALUATION OF CONSTRUCTION): \$ _____
TOTAL COST: _____ \$ _____

Job Description: _____

Re-inspection Fees: \$50.00 each Occurrence

Work Commencing Without a Permit: Where any work for which a permit is required is started without such a permit having been issued, the applicable fees shall be doubled. (This includes permits for Building, Electrical, Plumbing, Mechanical, Gas Etc.) The payment of such a double fee shall not relieve any persons from fully complying with the requirements if all applicable codes and City Ordinances including on work already performed, concealed or otherwise not inspected, nor shall it relieve them from any other penalties as may be prescribed by law.

Lead & Asbestos Abatement: State law requires proper licensure for contractors abating Lead or Asbestos containing materials in whole or in part, including the proper disposal thereof, and proper precautions safeguarding employees and others from exposure.

I hereby certify that I have read and examined this document and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. Granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

SEE BACK OF PAGE FOR SPECIFIC REGULATIONS

DATE DATE
CONTRACTOR OR AUTHORIZED AGENT - PRINT NAME SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT

REMODEL FINISH-OUT (INCLUDING BASEMENTS)

1. All sleeping rooms must have at least one window that has a clear opening of 5.7 Sq. Ft. with a sill height of 44" above finish floor maximum or a door to the exterior.
2. Any room with a closet is considered a sleeping room.
3. All HVAC Units new or existing must have a pan with a drain to the exterior or an automatic cut – off switch.
4. All accessible areas under any stairs shall be dry walled.
5. All sleeping rooms must have a smoke detector inside the room, and another within 10 Ft. outside of the door.
6. All bathrooms must have a 20-amp GFI receptacle.
7. All rooms must have electrical receptacles within 6' of the door or opening or interruption such as a fireplace, and then 12'0" O.C. thereafter along all walls.
8. Construction must comply with all current codes. The inspector in the field shall determine code compliance of all items not clearly detailed on the drawings submitted for plan review.

OFFICE USE ONLY

BASE APPLICATION ACCEPTED BY: _____
PLANS CHECKED BY: _____
ZONING APPROVAL: _____ TAX PARCEL NUMBER: _____
APPROVED FOR ISSUANCE BY: _____

Live Load: _____ Construction Type: _____ Occupancy Type: _____

STIPULATIONS / COMMENTS
