



**BRYAN COUNTY
PLANNING & ZONING DEPARTMENT**

134 E. Industrial Blvd
Pembroke, Ga. 31321
912-653-3893 or 653-5252
Fax 912-653-3864

185 Richard Davis Drive, Ste. 105
Richmond Hill, Ga. 31324
912-756-3177 OR 756-7962
-Fax 912-756-7951

BUILDING PERMIT CHECKLIST

PURSUANT TO BRYAN COUNTY'S ORDINANCE SECTION 8.2.1, A BUILDING PERMIT SHALL BE REQUIRED PRIOR TO THE ERECTION, CONSTRUCTION, MOVING OR ALTERATION OF ANY BUILDING OR PORTION THEREOF WHERE THE CONSTRUCTION IS 10 X 12 OR LARGER, OR ELECTRICAL, PLUMBING, HVAC OR POURED CONCRETE ARE INVOLVED. THE PERMIT WILL BE VALID FOR ONE YEAR. IT MAY BE RENEWED FOR SIX MONTHS IF THE PLANNING AND ZONING DEPARTMENT IS NOTIFIED BEFORE THE YEAR HAS EXPIRED.

FEES: Residential Building Permits: Square Footage of Building/Home x .273 = Residential Building Permit Fee.
Example: 25' x 100' = 2500 Sq. Ft. x .273 = \$682.50 rounded off to \$683.00

Commercial Building Permits: Estimated Cost of Construction x .007 for the first million dollars of project cost, plus .004 times the project cost over one million dollars. Example: \$3,000,000.00 (est. cost) - Multiply \$1,000,000 x .007 = \$7,000.00. Then multiply the other \$ 2,000,000 x .004 = \$ 8,000.00 (total cost \$ 7,000 + \$8,000 = \$ 15,000)

If a Well Service is to be installed, an additional Fee of \$30.00 will be assessed.

If a Culvert for a driveway is to be installed, an additional fee of \$30.00 will be assessed.

Please provide the following information. Incomplete applications will not be accepted.

_____ Proof that all taxes have been paid: (property, fire, trash pick-up, etc.) Fire tax receipt from the Tax Commissioners office. Pembroke – 653-3880 Richmond Hill – 756-2434

_____ If you do not know the 911 address please obtain from the E-911 office at 756-5216 or 653-4017.

_____ Map and Parcel Number of the property. This may be obtained from the tax assessor's office (653-3889.)

_____ Compliance Agreement/Notarized

_____ Subcontractor Form

_____ Copy of Georgia State Contractors License

_____ Plat of the property approved by the Planning and Zoning Department and recorded with the Clerk of Superior Court. This may be obtained from the Real Estate Division of the Clerk of Superior Court in the Bryan County Courthouse in Pembroke - 653-3872 or from the Courthouse Annex on Ford Avenue in Richmond Hill.

_____ Two sets of construction plans professionally prepared and stamped by a Georgia Licensed Architect or Engineer, including dimensions of heated and unheated areas. Buildings shall be designed to withstand 120 mph winds for areas east of I-95 and 110 mph winds west of I-95.

_____ Site plan indicating location of building in relation to setback requirements- include any other buildings located on the property, wetlands, and where the well and septic tank are located on the property.

_____ If a new septic tank is required, you will need to provide a septic tank permit (form enclosed) and it will have to be issued by the Health Department and return it to the P & Z office. If you plan on using the existing septic tank and it has not been inspected within the past 12 months, you will need to fill out the existing septic tank application (form enclosed) have it inspected and stamped by a health department official and return it to the P & Z office. Before Building Permit is issued approved permit is required. Pembroke Health Dept 653-4333 Richmond Hill Health Department 756-2611.

_____ NON-CONVERSION AGREEMENT (IF IN A FLOOD ZONE ONLY)

_____ If a well is required, please complete the enclosed form and include the Notice of Intent to Drill with the application.

_____ If a driveway culvert is required please complete attached application.

Application for building permits shall be granted or refused within thirty days from the date of application. One copy of plans shall be returned to the applicant marked either approved or disapproved and be attested to the same by the signature of the building inspector. The second copy of the plans similarly marked, shall be filed in the office of Planning and Zoning Department.

All persons involved in land development, design, review, permitting, construction, monitoring, or inspection of any land disturbing activity shall meet the education and training certification requirements, dependent on their level of involvement, for more information on this certification, please contact Coastal Georgia RDC Council at 185 Richard Davis Drive Suite 201, Richmond Hill, 912-459-2070.

COMPLIANCE AGREEMENT

The signing of this statement certifies that I understand the following:

ONLY ONE (1) principle building (dwelling / business) may be erected on the lot. I certify that there is no other principle building on this parcel.

Owner

Address

Tax Parcel # (PIN)

Signature of Applicant / Owner

Date

(Notary Seal)

Signature of Notary Public

VERIFICATION OF CURRENT PAID PROPERTY TAXES FOR APPLICATION

The undersigned below is authorized to make this application. The undersigned certifies that all Bryan County property taxes, billed to date for the parcel listed below have been paid in full the Tax Commissioner of Bryan County, Georgia. In no case shall an application or reapplication for rezoning be processed without such property verification.

*NOTE: A separate verification form must be completed for each tax parcel included in rezoning request.

Parcel Identification Number (PIN): _____

Signature of Applicant **Date**

Type or Print Name

.....
BRYAN COUNTY TAX COMMISSIONER'S USE ONLY

(Payment of all property taxes billed to date for the above referenced parcel have been verified as paid current and confirmed by the signature below.)

Name: _____ Title: _____

Date: _____

BUILDING PLAN REQUIREMENTS

I. Plan requirements - **All plans must be certified by a Georgia licensed Engineer or Architect and must bear the preparer's stamp and signature.**

A) Plot plan

1. Size of lots
2. Exact location of new and existing buildings
3. Location of well and septic tank
4. Drainage plan

B) Front and side view elevations

C) Floor plan

1. Electrical
 - a. Switches, receptacles, lights
 - b. Size of service (amps), panel location
2. Ground fault protection where required
3. Heating and air conditioning equipment
 - a. Size and location
 - b. Specify gas or electric
4. Kitchen and bathroom dimensions
 - a. Location of cabinets including kitchen island
 - b. Appliances and rangehood
5. All plumbing fixtures
6. Sizes of all doors and windows
 - a. Indicate glass type for hazardous locations
7. Bonus room (including bathrooms)
 - a. Sizes of doors and windows
 - b. Stairs and handrails

D) Cut section of exterior walls (typical wall section)

1. Size and dimensions of the footing and rebar (Vertical rebar required)
2. A-bolt size and spacing
3. Monolithic slab or typical slab detail
4. Size and spacing of floor joist and interior piers
5. Size of lumber and spacing of interior walls
6. Size of roof rafter and trusses with hurricane clips
7. Show roof finish, shingles, felt and plywood
8. Show pitch of roof
9. Show exterior finishes of wall – brick, wood, etc.
10. Show floor finish – tile, wood, etc.

II. Certificate of elevation

A) Information indicating if property is in flood zone

- B) If property is in flood zone, this office needs a copy of the certificate of elevation prior to a slab inspection or after the subfloor framing has been established. Inspections will not be scheduled until this office has received this information.

III. Res Check form: www.enegrycodes.gov/rescheck (Georgia energy efficiency code compliance to ensure proper climate zone, specific U-factors for windows and doors. Specific R-values for insulation, etc. specific to “your building project”).

SUB-CONTRACTOR CERTIFICATION

Permit #: _____ Date: _____

Gen. Contractor: _____ Owner: _____

City/County: _____ Bus. Lic. #: _____

Job Location: _____ Phone: _____

Street Address: _____

Electrical contractor: _____ Phone: _____

Address: _____

I hereby certify that I will perform the electrical work on the location described above and I further certify that I have a valid state and county business license and my _____ city/county business license number is _____ and my state license number is _____.

Signature: _____ Date: _____

Heating & Air Contractor: _____ phone: _____

Address: _____

I hereby certify that I will perform the mechanical work on the location described above and I further certify that I have a valid state and county business license and my _____ city/county business license number is _____ and my state license number is _____.

Signature: _____ Date: _____

Plumbing Contractor: _____ Phone: _____

Address: _____

I hereby certify that I will perform the plumbing work on the location described above and I further certify that I have a valid state and county business license and my _____ city/county business license number is _____ and my state license number is _____.

Signature: _____ Date: _____

Septic Tank Contractor: _____

City/ County license number _____

Well Drilling Contractor: _____

City / County license number _____ State License Number _____

Change in Sub-Contractor Form

Permit #: _____ Date: _____

Gen. Contractor: _____ Owner: _____

Job Location: _____ Phone: _____

Street address: _____

New contractor: _____

Address: _____

Date: _____ Phone: _____

I hereby certify that I will perform the _____ work described above and I further certify that I have a valid state county business license and my _____ city/county license number is _____ and my state license number is _____.

Signature

date

BUILDING INSPECTION REQUIREMENTS

REQUIRED INSPECTIONS: The Building Official, upon 24 hours advance notification from the permit holder or his agent, shall make the following inspections and such other inspections as necessary, and shall either release that portion of the construction or shall notify the permit holder or his agent of any violations which must be corrected in order to comply with the technical code: **Note: On Monolithic Slabs, you are required to submit both a load bearing test for the footing portion of the pour and the compaction test for the slab portion of the pour prior to a slab inspection being scheduled!**

<u>SLAB/BLOCK CONSTRUCTION</u>	<u>SUBFLOOR CONSTRUCTION</u>
Pre-Site/Bldg Pad (prior to the commencement of construction)	Pre-Site/Bldg Pad (prior to the commencement of construction)
Building Saw – after the permit is issued	Building Saw – after the permit is issued
**Load-Bearing Capacity Test – before footing inspection	**Load-Bearing Capacity Test – before footing inspection
Footing Inspection – before pouring	Footing Inspection – before pouring
Hollow Cell Inspection	Hollow Cell Inspection
Solid Cell Inspection	Solid Cell Inspection
In-Slab Plumbing (Rough-in Plumbing Inspection)	**Flood Elevation Certificate needed BEFORE Sub-Floor Inspection if in flood zone
**Elevation Certificate & Compaction Test if in flood zone BEFORE slab inspection	Sub-Floor framing inspection (BEFORE floor decking)
Compaction Test-before slab inspection	
Slab Inspection	
Nail Pattern Inspection	Nail Pattern Inspection
Framing & Rough-In Inspection-(Build, Mech., Elec., Plum) Must all be done at one time	Framing & Rough-In Inspection-(Build, Mech., Elec., Plum)Must be done all at one time
Insulation Inspection	Insulation Inspection
Temp Power Inspection-before final	Temp Power Inspection-before final
** Elevation Certificate needed BEFORE Final Inspection if in flood zone	**Elevation Certificate needed BEFORE Final Inspection if in flood zone
FINAL Inspection	FINAL Inspection

A Certificate of Occupancy will be issued after the Building Inspector & the Building Official have signed the certificate. This usually takes 1-3 days, and then you will be notified to pick up the CO.

WRITTEN RELEASE: Work shall not be done on any part of a building, structure, electrical, gas, mechanical, or plumbing system beyond the point indicated in each successive inspection without first obtaining a written release from the Building Official. Such written release shall be given only after an inspection has been made of successive step in the construction or installation.

Please contact (912) 653-3893 for the North Bryan County office, serving both the Pembroke and Ellabell Community when the above referenced inspections are needed. Please contact (912) 756-3177 for the South Bryan County office, serving the unincorporated area of Richmond Hill. Bryan County Building Inspectors: Chris Owens in Pembroke (653-3893) and Patrick Patton in Richmond Hill (756-3177) if you have any questions regarding inspections.

CERTIFICATE – COPYRIGHT

The undersigned certifies to Bryan County that:

- 1) the attached plans are owned by the undersigned;
- 2) the undersigned uses same in compliance with all copyright laws;
- 3) the plans have not been illegally reproduced;
- 4) the submission of same to the county does not violate any copyright law.

WITNESS

APPLICANT

DATE

DATE

The undersigned further certifies that if the undersigned requests copies of same, such request complies with all applicable law and recopy(s) will be used in compliance with the law.

WITNESS

APPLICANT

DATE

DATE

AFFIDAVIT

I CERTIFY THAT THE ELECTRICAL INSPECTION WAS DONE AND APPROVED BY THE BRYAN COUNTY PLANNING & ZONING. I AM REQUESTING TEMPORARY POWER RELEASE FROM BRYAN COUNTY MAY AT ANY TIME DISCONNECT MY SERVICE. I FURTHER UNDERSTAND THAT PERMANENT POWER CAN BE RELEASED ONCE A FINAL INSPECTION IS DONE AND A CERTIFICATE OF OCCUPANCY IS ISSUED. I FURTHERMORE ATTEST THAT BRYAN COUNTY HOLDS NO RESPONSIBILITY FOR ANY MONETARY REIMBURSEMENT DUE TO A DISCONNECT TO ELECTRICAL SERVICES.

SIGNED THIS _____ DAY OF _____

SIGNATURE _____

WITNESS _____

LOT # _____

CONTRACTOR/HOME OWNER _____

BRYAN COUNTY ENVIRONMENTAL HEALTH SERVICES

PO BOX 397
RICHMOND HILL, GEORGIA 31324
(912) 756-2611
FAX (912) 756-4828

PO BOX 9
PEMBROKE, GA. 31321
(912) 653-4333
FAX (912) 653-4328

EXISTING SEPTIC TANK APPLICATION

The following form must be filled out completely and submitted to the health department with an approved plat. Approval of an existing septic tank system does not guarantee the system for any period of time; if the system malfunctions the property owner will be responsible for the repair in a timely manner.

Applicant's Name _____ Phone number _____
Mailing address _____ City _____ State _____ Zip _____
Original Owner's name (installed septic system) _____ Year _____

PROPERTY TO BE TESTED:

Owner of Property: _____ Phone Number _____
Tax map # _____ Parcel # _____
Lot Number/Subdivision _____
911 Address _____
City _____ State _____ Zip _____
Type facility (residence, etc) _____

Reason for property to be tested:

_____ Planning & Zoning _____ Mortgage Company
_____ Other (explain) _____
Specific directions to lot (lot should be marked clearly) _____

Applicant Signature _____ Date _____

Office Use Only:

Records _____ Approved _____ Not Approved _____ Repair System _____
Comments:
___ The system appears to be functioning properly with proper maintenance should cause no unsanitary conditions.
___ The system is older and may need additional lines at a later date.
Date received _____ Payment \$ _____ Check # _____ Cash _____

Zoning Clearance:

Clearance# _____

Zone: _____ Lot Size: _____
Any existing residence on property: _____ YES _____ NO
Proposed use of property: _____
Approved: _____ Date: _____

BRYAN COUNTY ENVIRONMENTAL HEALTH SERVICES

**PO BOX 397
RICHMOND HILL, GA. 31324
912-756-2611
912-756-4828**

**PO BOX 9
PEMBROKE, GA. 31321
912-653-4333
912-653-4328**

WELL PERMIT

Date _____

Applicant _____ **Phone no.** _____

Address _____

Address or lot number of property on which well will be located: _____

Map and Parcel number: _____

Zoning Clearance:

Are there any existing buildings on property? _____

What is the proposed use of the property? _____

What is the Land Use Zone? _____

What is the Lot size? _____

Approved by: _____ **Date:** _____
Zoning Administrator

Health Department Clearance:

Date Received: _____ **Date of Test Results:** _____

Tested by: _____

Payment: check \$ _____ cash \$ _____

Please attach proof of county tax payment, a plat of the property and a copy of the Intent to Drill signed by the well driller.

CULVERT PERMIT

Date: _____

Applicant: _____

Address: _____ Phone no. _____

Address or lot number and subdivision on which culvert is located:

Map and Parcel No. _____ Zone: _____

Contractor: _____

Phone No. _____ Business License No. _____

Size of culvert: _____ Size of piping; _____

Type of piping used: _____

Please attach proof of county tax payment, copy of recorded plat and a site plan showing location of culvert on the lot.