

APPLICATION FOR BUILDING PERMIT
LONG COUNTY, GEORGIA

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LIST OF INSPECTIONS REQUIRED
WITH BUILDING PERMITS

NEWHOME

1. Slab/Footer _____
2. Cover Up _____
3. Temporary Power _____
4. Permanent Power _____
5. Final _____

A CO will not be issued until and Blow Door Test (by your Heating & Air Company) is performed and a Final Inspection has been completed.

ADDITIONS/SHEDS/RENOVATIONS WITH POWER & OR PLUMBING

1. Slab/Footer (if Applicable) _____
2. Cover Up _____
3. Permanent Power _____
4. Final _____

OTHER BUILDINGS WITH NO POWER OR PLUMBING

1. Slab/Footer (If Applicable) _____
2. Final _____

**APPLICATION FOR BUILDING PERMIT
LONG COUNTY, GEORGIA**

TO: COUNTY BUILDING INSPECTOR:

Application is hereby made according to the requirements of the Building Permit Ordinance to erect/alter a structure described herein or as shown accompanying plans and specifications.

PERMIT APPLICATION TO SPECIFY TO:

Erect:	_____	Single Family Residence:	_____
Alter:	_____	Duplex Residence:	_____
Repair:	_____	Apartment Building:	_____
Move:	_____	Retail Outlet:	_____
Demolish:	_____	Industrial Building:	_____
Other:	_____	Other:	_____
	_____		_____

LOCATION:

Address: _____

Legal Lot #: _____ Block #: _____ Subdivision: _____

Zoned: _____ Use: _____ Acreage: _____ Total Sq. Ft of Building: _____

No. of Stories: _____ No. of Bathrooms: _____ No. of Bedrooms: _____

Carport Size: _____ Garage Size: _____ San. Sewer: _____ Shallow Well: _____

Deep Well: _____ Community Water System: _____ Driveways: _____ Walks: _____

Fences: _____

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CONTRACTORS:

General Contractor:	_____	License #:	_____
Electrical Contractor:	_____	License #:	_____
Plumbing Contractor:	_____	License #:	_____
HVAC Contractor:	_____	License #:	_____

OWNER INFORMATION:

Name: _____ Address: _____
Phone: _____

AFFIDAVIT:

I swear or affirm that if permit is granted, I agree to conform to all Long County Building Codes, Georgia Building, Electrical, Plumbing and Fire codes as well as international residential codes, IBC, IMC, IPC, IFC, IFGC, NEC

Signature: _____ Approved: _____

Paid: _____ Date: _____ Permit #: _____

LONG COUNTY, GEORGIA

This permit shall become invalid if applicant fails to comply with appropriate county, state and federal laws as to license requirements, applicable health regulations, zoning restrictions, environmental protection requirements, minimum standards as defined by building, plumbing, electrical and fire protection codes and unless work authorized by it shall have been commenced within six (6) months after date approved.

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LONG COUNTY, GEORGIA**

AFFIDAVIT PAGE:

PLEASE PRINT CLEARLY

General Contractor Name: _____

Address: _____ Zip: _____

Phone #: _____ License #: _____

AFFIDAVIT: I swear or affirm that if permit is granted, I agree to conform to all Long County Building Codes, Georgia Building, Electrical, Plumbing and Fire Codes as well as International Residential, IBC, IMC, IPC, IFC, IFGC, NEC.

Signature: _____

Electrical Contractor Name: _____

Address: _____ Zip: _____

Phone #: _____ License #: _____

AFFIDAVIT: I swear or affirm that if permit is granted, I agree to conform to all Long County Building Codes, Georgia Building, Electrical, Plumbing and Fire Codes as well as International Residential, IBC, IMC, IPC, IFC, IFGC, NEC.

Signature: _____

Plumbing Contractor Name: _____

Address: _____ Zip: _____

Phone #: _____ License #: _____

AFFIDAVIT: I swear or affirm that if permit is granted, I agree to conform to all Long County Building Codes, Georgia Building, Electrical, Plumbing and Fire Codes as well as International Residential, IBC, IMC, IPC, IFC, IFGC, NEC.

Signature: _____

HVAC Contractor Name: _____

Address: _____ Zip: _____

Phone #: _____ License #: _____

AFFIDAVIT: I swear or affirm that if permit is granted, I agree to conform to all Long County Building Codes, Georgia Building, Electrical, Plumbing and Fire Codes as well as International Residential, IBC, IMC, IPC, IFC, IFGC, NEC.

Signature: _____

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VERIFICATION OF CURRENT PAID PROPERTY TAXES FOR APPLICATION

THE UNDERSIGNED BELOW IS AUTHORIZED TO MAKE THIS APPLICATION. THE UNDERSIGNED CERTIFIES THAT ALL LONG COUNTY PROPERTY TAXED TO DATE FOR THIS PARCEL LISTED BELOW HAVE BEEN PAID IN FULL. IN NO CASE MAYU A BUILDING PERMIT APPLICATION BE PROCESSED WITHOUT VERIFICATION OF PAID PROPERTY TAXES.

A SEPARATE FORM MUST BE SUBMITTED FOR EACH PARCEL

Map and Parcel: _____

Signature of Applicant: _____ Date: _____

Type or Print Name: _____

Long County Tax Commissioner 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: _____

Long County Tax Assessors Office Only

Map and Parcel Number: _____

THE MAP AND PARCEL NUMBERS FOR THE ABOVE REFERENCED HAVE BEEN VERIFIED AS CORRECT AND CONFIRMED BY THE SIGNATURE BELOW.

Name: _____ Title: _____

Date: _____
