

CITY OF ATHENS

BUILDING DEPT.
Athens, TN

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

IMPORTANT - Applicant to complete all items.

I. LOCATION OF BUILDING

AT (LOCATION) _____ (NO.) _____ (STREET) _____ ZONING DISTRICT _____

BETWEEN _____ AND _____ (CROSS STREET) _____ (CROSS STREET)

SUBDIVISION _____ LOT _____ BLOCK _____ LOT SIZE _____

II. TYPE AND COST OF BUILDING – All applicants complete Parts A – D

A. TYPE OF IMPROVEMENT

- 1 New building
- 2 Addition (If residential, enter number of new housing units added, if any, in Part D, 13)
- 3 Alteration (See 2 above)
- 4 Repair, replacement
- 5 Wrecking (If multifamily residential, enter number of units in building in Part D, 13)
- 6 Moving (relocation)
- 7 Foundation only

D. PROPOSED USE – For "Wrecking" most recent use

- | | |
|---|--|
| Residential | Nonresidential |
| 12 <input type="checkbox"/> One family | 18 <input type="checkbox"/> Amusement, recreational |
| 13 <input type="checkbox"/> Two or more family – Enter number of units -----> | 19 <input type="checkbox"/> Church, other religious |
| 14 <input type="checkbox"/> Transient hotel, motel, or dormitory – Enter number of units -----> | 20 <input type="checkbox"/> Industrial |
| 15 <input type="checkbox"/> Garage | 21 <input type="checkbox"/> Parking garage |
| 16 <input type="checkbox"/> Carport | 22 <input type="checkbox"/> Service station, repair garage |
| 17 <input type="checkbox"/> Other – Specify _____ | 23 <input type="checkbox"/> Hospital, institutional |
| | 24 <input type="checkbox"/> Office, bank, professional |
| | 25 <input type="checkbox"/> Public utility |
| | 26 <input type="checkbox"/> School, library, other educational |
| | 27 <input type="checkbox"/> Stores, mercantile |
| | 28 <input type="checkbox"/> Tanks, towers |
| | 29 <input type="checkbox"/> Other – Specify _____ |

B. OWNERSHIP

- 8 Private (individual, corporation, nonprofit institution, etc.)
- 9 Public (Federal, State or local government)

Non-Residential Use of Building: _____

C. COST

10. Cost of improvement \$ _____
- To be installed but not included in the above cost*
- a. Electrical \$ _____
- b. Plumbing \$ _____
- c. Heating, air conditioning \$ _____
- d. Other (elevator, etc) \$ _____
11. TOTAL COST OF IMPROVEMENT \$ _____

(Omit cents)

- Plans Submitted
- Site Plans
- Access Control Plan

III. SELECTED CHARACTERISTICS OF BUILDING – For new buildings and additions, complete Parts E – L; for wrecking, complete only Part J, for all others skip to IV.

E. PRINCIPLE TYPE OF FRAME

- 30 Masonry (wall bearing)
- 31 Wood frame
- 32 Structural steel
- 33 Reinforced concrete
- 34 Other – Specify _____

G. TYPE OF SEWAGE DISPOSAL

- 40 Public or private company
- 41 Private (septic tank, etc.)

H. TYPE OF WATER SUPPLY

- 42 Public or private company
- 43 Private (well, cistern)

J. DIMENSIONS

- 48. Number of stories
- 49. Total square feet of floor area all floors, based on exterior dimensions
- 50. Total land area, sq. ft.

K. NUMBER OF OFF-STREET PARKING SPACES

- 51. Enclosed
- 52. Outdoors

F. PRINCIPLE TYPE OF HEATING FUEL

- 35 Gas
- 36 Oil
- 37 Electricity
- 38 Coal
- 39 Other – Specify _____

I. TYPE OF MECHANICAL

- Will there be central air conditioning?
- 44 Yes 45 No
- Will there be an elevator?
- 46 Yes 47 No

L. RESIDENTIAL BUILDINGS ONLY

- 53. Number of bedrooms
- 54. Number of bathrooms { Full Partial

NO. STREET

IV. ZONING PLAN EXAMINERS NOTES

DISTRICT	
USE	
FRONT YARD	
SIDE YARD	SIDE YARD
REAR YARD	
NOTES	

V. SITE OR PLOT PLAN – *For Applicant Use*

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VI. IDENTIFICATION – *To be completed by all applicants*

	Name	Mailing address – <i>Number, street, city and state</i>	ZIP code	Tel. No.
1. Owner or Leasee				
2. Building Contractor		License No.		
3. Architect or Engineer				
The owner of this building and the undersigned agree to conform to all applicable laws of this jurisdiction.				
Signature of applicant	Address		Application date	



INSPECTIONS

Permit Requirement Checklist

The following items must be submitted along with the application to complete the permit requirements. All pertaining permit items from the checklist must be completed or your application will be rejected.

COMMERCIAL AND INDUSTRIAL TYPE BUILDING PERMIT.

1. Site plans that comply with the City of Athens site plan ordinance.
2. Construction drawings that are stamped and signed.
3. Specifications manual for the project.
4. Storm water calculations.
5. Copy of contractor's license and certificate of insurance.
6. Sprinkler plans if applicable.
7. Completed application form.

RESIDENTIAL TYPE BUILDING PERMIT.

1. Completed sign off sheet from the Athens Utility Board (included in the packet).
2. Completed driveway permit and silt fence sign off sheet.
3. All applicable applications completed such as (plumbing, electrical, and mechanical).
4. Plat of the property that shows the location of the proposed structure. (must show setbacks for the structure).
5. Complete and correct address for the project.
6. Completed application form.
7. The property line must be marked with a visible string to verify setbacks.

SIGN PERMIT.

1. Completed application form & Copy of State license and certificate of insurance.
2. Stamped and signed engineered drawings also showing size and height of sign.
3. Location map which also shows all setbacks from property lines.
4. Documentation showing the sign will meet the spacing requirements. (off premise signs)

ELECTRICAL, MECHANICAL, AND PLUMBING PERMITS

1. Completed application form & Certificate of insurance.
2. Copy of State license if do not have City license.



INSPECTIONS

Required Setbacks From Property Lines Per Zoning District

R-E Residential Estates Accessory building	Front yard 30 Feet Rear Yard 20 feet side yards 15 feet 15 feet from the side and rear property lines.
R-1 Residential Accessory buildings	Front yard 30 feet Rear yard 20 feet side yards 15 feet 15 feet from the side and rear property lines.
R-2 Residential Accessory buildings	Front yard 30 feet Rear yard 20 feet side yards 15 feet 15 feet from the side and rear property lines.
R-3 Residential Accessory buildings	Front yard 30 feet Rear yard 20 feet side yards 15 feet 15 feet from the side and rear property lines.

Commercial and Industrial districts should check with the Building Official for setbacks.



INSPECTIONS

ZONING DISTRICT FORM

AS PART OF THE PERMIT PROCESS THIS FORM MUST BE COMPLETED AND RETURNED WITH THE APPLICATION BEFORE A PERMIT CAN BE ISSUED.

Within the area below you are required to draw in the parcel of property along with the proposed structure. The drawing must show the property boundaries, the structure located on the property, and all setback dimensions from the property lines.

Please indicate what the zoning district you are located within: _____



BUILDING PERMIT

NAME _____
LOCATION _____
SUBDIVISION _____
LOT NO. _____ BLOCK NO. _____

DATE _____
BUILDING PERMIT NO. _____
DATE ISSUED _____
ZONE _____

- () The property described above lies within a land development project under the jurisdiction of Athens Municipal Regional Planning Commission, and Athens Municipal Regional Planning Commission has approved this area for development.
- () The property lies within a developed area and is not subject to regulations of Athens Municipal Regional Planning Commission.

_____, 20____
CITY OF ATHENS-AUTHORIZED REPRESENTATIVE DATE

UTILITY SERVICE DESIRED: ELECTRIC () WATER () GAS () SEWER ()

On receipt of signed application for utility service, at the office of Athens Utilities Board, service could be made available within the approximate time limits indicated below:

ELECTRIC SERVICE _____
AUTHORIZED AGENT - AUB

WATER SERVICE _____
AUTHORIZED AGENT - AUB

GAS SERVICE _____
AUTHORIZED AGENT - AUB

SEWER SERVICE _____
AUTHORIZED AGENT - AUB

FOR OOSTANAULA BASIN:
STATE APPROVAL OF TAP PER C.O. 89-3129** _____ YES _____ NO

REMARKS: _____

*This is not an application for utility services, but is a part of the building permit application.

**** STATE APPROVAL FOR SEWER TAP MAY TAKE UP TO 30 DAYS****



COMMUNITY DEVELOPMENT

BUILDING PERMIT APPLICATION

This form is part of the Building Permit Application and must be completed before the permit can be issued.

This form must be signed by the Director of Public Works or his/her designee.

SILT FENCE INSTALLED CORRECTLY:

DRIVEWAY INSTALLED AND GRAVELED:

DRIVEWAY PERMIT ISSUED:

This form must be completed before a building permit can be issued.

The silt fence and graveled driveway must be maintained during construction as to prevent mud from entering the street and storm water system.

The minimum charge for the City of Athens to clean the street around your construction site will be THREE HUNDRED (\$300.00) DOLLARS.

Name of contact person responsible for the construction site.

Name:

Address:



INSPECTIONS

DRIVEWAY PERMIT PRE-APPLICATION

ALL RESIDENTIAL CONSTRUCTION MUST ADHERE TO THE FOLLOWING AND AGREE TO IMPLEMENT THE FOLLOWING EROSION AND SEDIMENT CONTROL BEST MANAGEMENT PRACTICES PRIOR TO OBTAINING A DRIVEWAY PERMIT AND PRIOR TO RECEIVING A BUILDING PERMIT. FAILURE TO USE PROPER EROSION CONTROL MEASURE COULD RESULT IN A MINIMUM BILL OF \$300.00 FOR SEDIMENT AND EROSION CLEANUP ACTIVITIES.

5.0 EROSION & SEDIMENTATION CONTROL

Developers and/or property owners shall use appropriate erosion and sedimentation control measures to ensure that erosion, or adverse conditions caused by erosion or sedimentation, is eliminated or held to an acceptable minimum and does not cross to an adjoining property, R.O.W., street, or stream.

All control measures will be approved in the field by the appropriate city staff, typically the Public Works Director, or his designee, and maintained by the developer.

5.1 Control Measures

The following control measures should be used as a minimum for erosion control:

" The smallest practical area of land should be exposed at any one time during development. Mulching or other protective measures should be used to protect exposed areas.

"Areas that will be exposed for more than three (3) months shall be seeded and mulched or landscaped.

"Temporary furrows, terraces, sediment or debris basins should be installed to prevent washing and erosion during construction.

"In areas where soil may wash onto the roadway or into a drainage basin, the developer will be required to install and maintain a silt fence, hay bales, or both.



INSPECTIONS

“Final vegetation should be installed as soon as practical in the development after the land is exposed.

“A gravel construction entrance shall be constructed prior to any site work. The owner or his/her contractor throughout the construction process will maintain this construction entrance. Entrance will be a minimum of 30 feet long, but may need to be longer.

“Sediment washed onto roadways or into drainage ditches or basins, and soil tracked onto roadways by construction equipment/vehicles or daily ingress and egress onto the site shall be removed at the end of each working day by the contractor, developer, or property owner.

By signing below you agree to follow the sediment and erosion control minimum measures listed above and to remove any silt, rock, debris, mud, or dirt from the road, or storm water facilities each day prior to leaving the jobsite and agree to a fee of \$300.00 minimum per occurrence if you fail to do so.

Signature of responsible person

Date



**City of Athens Public Works Department
Application for Residential Access Permit**

Location / Address: _____

Owner Name: _____

Phone Number: _____

Contractor: _____

Address/Phone: _____

SITE SKETCH

Street Name

STRUCTURE

House No. _____

FRONT

Street Name

Sketch in proposed driveway location showing ditches and/or curbing. Indicate lot dimensions and sketch in property line locations. Indicate silt fencing and length of construction entrance.

Residential Access / Driveway Guidelines

- Width of Residential Driveways shall be a minimum of 10 feet to a maximum of 20 feet.
- Driveways shall be limited to one (1) driveway entrance per 100 feet of street frontage.
- Driveways shall be perpendicular to the street centerline whenever possible.
- When drainage pipes are required, the public works department will size and install. Property owner to purchase the proper size / type of pipe as determined by the department.
- Driveways must match existing street, curb, and gutter grades – no concrete or asphalt material is to extend beyond the curb line.
- All sediment and erosion control measures must be installed prior to permit approval including silt fencing and construction entrance.

Approved: _____ **Date:** _____



BUILDING DEPARTMENT

SIGN PERMIT APPLICATION

COMPANY: _____

DATE: _____

ADDRESS: _____

STATE LICENSE NO: _____

EXPIRATION DATE: _____

INSTALLER: _____

STATE LICENSE NO: _____

ADDRESS: _____

EXPIRATION DATE: _____

JOB LOCATION: _____

ZONE: _____

NAME OF BUSINESS: _____

TYPE OF SIGN (DESCRIBE): _____

HEIGHT: _____

WIND SPEED DESIGN: _____

TYPE OF ELECTRICAL CONNECTION: _____

TYPE OF ILLUMINATION: _____

VALUE OF PROJECT: _____

DESCRIBE SCOPE OF WORK: _____

NOTE: ALL SIGNS EXCEEDING 20' IN HEIGHT MUST HAVE STAMPED DRAWINGS AND BE DESIGNED FOR 80 M.P.H. WINDS.



BUILDING DEPARTMENT

MECHANICAL PERMIT APPLICATION

CONTRACTOR: _____ DATE: _____
ADDRESS: _____ STATE LICENSE No: _____
_____ EXPIRATION DATE: _____

JOB LOCATION: _____

IS THIS JOB: NEW
 REPLACEMENT

SIZE OF UNIT:
BTU'S OR KW'S HEAT: _____

DUCT SIZE: SUPPLY _____ NO. OF TAKEOFFS: _____
RETURN _____ TYPE OF DUCT: _____

CONDENSATION PAN: _____ FIRE DAMPERS: _____
ELECTRICAL REQUIREMENTS: _____ DUCT DETECTORS: _____
FIRE WALL PENETRATIONS: _____

VALUE OF PROJECT: _____

DESCRIBE SCOPE OF WORK: _____

* A LIMITED LICENSE IS NOT LEGAL INSIDE THE CITY LIMITS *



BUILDING DEPARTMENT

ELECTRICAL PERMIT APPLICATION

CONTRACTOR: _____
ADDRESS: _____

DATE: _____
STATE LICENSE NO: _____
EXPIRATION DATE: _____

JOB LOCATION: _____ SIZE OF SERVICE: _____

IS THIS JOB: NEW CONSTRUCTION	<input type="checkbox"/>	TYPE OF SERVICE: OVERHEAD	<input type="checkbox"/>
SERVICE UPGRADE	<input type="checkbox"/>	UNDERGROUND	<input type="checkbox"/>
ADDITION OF CIRCUITS	<input type="checkbox"/>	METER BASE	<input type="checkbox"/>
POOL CONNECTION	<input type="checkbox"/>	C.T. CABINET	<input type="checkbox"/>
SIGN CONNECTION	<input type="checkbox"/>		
MANUFACTURED HOME	<input type="checkbox"/>	TYPE OF WIRING METHOD: N M CABLE	<input type="checkbox"/>
OTHER	<input type="checkbox"/>	MC CABLE	<input type="checkbox"/>
		AC CABLE	<input type="checkbox"/>
		EMT	<input type="checkbox"/>

FIRE WALL PENETRATIONS: _____

ROUGH-IN INSPECTIONS NEEDED: _____

VALUE OF PROJECT: _____

DESCRIBE SCOPE OF WORK: _____

**NOTE: ALL COMMERCIAL BUILDINGS MUST BE WIRED IN CONDUIT.
PVC CONDUIT NOT ALLOWED IN COMMERCIAL BUILDINGS.**

*** A LIMITED LICENSE IS NOT LEGAL INSIDE THE CITY LIMITS ***

City of Athens Building Department
815 North Jackson Street
Athens, TN 37371-0849



Gene McConkey, Building Inspector
(423) 744-2752 – Office
(423) 744-8866 – Fax
gmccconkey@athenstn.gov

City of Athens Nonstandard Electrical Inspection Fee

Customer: _____ Date: _____

Construction Address: _____

Electrical Contractor: _____ Registration #: _____

Type of Occupancy: Commercial Industrial Number of Floors: _____

Size Number of Services

Size and Number of Services:

1)	_____	_____
2)	_____	_____
3)	_____	_____
4)	_____	_____
5)	_____	_____

Person authorized to request inspections: _____

FEES

Service Entrance Inspection _____ @ \$175 = \$ _____

Rough-in Inspections _____ @ \$ 35 = \$ _____

Occupancy Final _____ @ \$ 75 = \$ _____

Final Inspection _____ @ \$350 = \$ _____

TOTAL NONSTANDARD FEE \$ _____

It is mutually confirmed by the Contractor and Inspector, as evidenced by the signatures below, that the fees and inspections itemized above are acceptable to both parties. It is further understood that this agreement is not valid until signed by both parties.

Contractor

Electrical Inspector

Date

Date



BUILDING DEPARTMENT

PLUMBING PERMIT APPLICATION

ALL FIXTURE TRAP SIZES MUST BE COMPLETED OR INDIVIDUAL
FIXTURE QUANTITIES MUST BE COMPLETED BEFORE A PERMIT
CAN BE OBTAINED.

Contractor Name: _____
Address: _____
Licenses number (state or local) _____
Certificate of Insurance Submitted: _____
Contract Amount for Project: _____
Plans Review Completed: _____
Project Address: _____
Project Name: _____
Type of Project: Residential [] Commercial [] Industrial []

Please indicate the number of fixture trap sizes or individual fixtures with no trap below:

- 1 ½ -1 ¼ fixture trap _____ @ \$ 2.00 ea. = _____
- 2 fixture trap _____ @ \$ 2.50 ea. = _____
- 3 fixture trap _____ @ \$ 3.00 ea. = _____
- 4 fixture trap _____ @ \$ 3.50 ea. = _____

- Backflow preventers _____ @ \$ 15.00 ea. = _____
- Grease Traps _____ @ \$ 15.00 ea. = _____
- Oil Separators _____ @ \$ 15.00 ea. = _____
- Water Heater Replacement _____ @ \$ 15.00 ea. = _____
- Interior Water line Rough in _____ @ \$ 15.00 ea. = _____
- Exterior Water line Replacement _____ @ \$ 15.00 ea. = _____
- Exterior Sewer Line Replacement _____ @ \$ 15.00 ea. = _____
- Underground Storm Sewer _____ @ \$ 15.00 ea. = _____
- Under Slab Rough In _____ @ \$ 15.00 ea. = _____
- New Construction _____ @ \$ 10.00 ea. = _____
- Total _____