

Hart County Building Permit Application Form

rev 8/14/19

Date

Please refer to Hart County Code Sec. 18 for building regulations

Land Owner's Name

Mailing Address

City

State Zip Code

If you are building or expanding any habitable structure you **must** provide a copy of the approved septic system permit from the Hart County Health Department, along with this application form, otherwise your request to issue a permit will be denied.

Owner's Phone No.

Address of Work Site

Tax Parcel Number of work site

O.G.G.A. 43-41-14(a) requires that all residential and general contractors be licensed. The contractor must provide proof that they are properly licensed before a permit can be issued.

Name of Contractor

Contractor's Phone

Contractor's License Number:

Fees:
For any construction valued over \$2,500 the fee is \$25.00

Description of Work to be performed

Approximate Start Date

Estimated Value of Construction

Office Use Only

Permit No:

Date Issued

Issued By:



HART COUNTY BOARD OF COMMISSIONERS
 BUILDING PERMITTING
 800 CHANDLER STREET
 HARTWELL GA 30643
 706-376-2024
 www.hartcountyga.gov

**AFFIDAVIT OF RELATIONSHIP OF PERMIT APPLICANT
 TO PROPERTY OWNER**

I, the undersigned applicant for a **BUILDING** permit in Hart County, GA, do hereby certify the following relationship with the owner of the property I propose to build upon:

_____ I am the owner of the property, and my name as it appears on the permit is the same as it is shown on the deed and/or property record at the Appraiser's Office. (If name does not match due to recent purchase, a copy of the deed is required)

_____ I am a prospective buyer of the property *and* under contract with the current owner. (Copy of contract and notarized letter from seller is required for proof)

_____ I am a tenant of the current property owner, and have permission from the owner to obtain permits to build, renovate, or otherwise improve the property. (Notarized letter from owner required)

_____ I have a contractual agreement with the property owner other than the above conditions. This agreement is described as follows:

Signature of Applicant: _____

Printed Name of Applicant: _____

Date: _____

Office Use Only

Permit Number: _____

Date Issued: _____



Affidavit

By signing below you are hereby certifying that you are aware of and will comply with the following County Ordinance for parcels of land subdivided after 2000:

County Ordinance Sec. 46-191. Lot sizes and proportions.

(c) The principal building on any lot shall meet the following setback requirements:

Front: 40 feet

Rear: ten feet. Applies to newly subdivided lots after enacted of this revision on July 27, 2010.

Side: ten feet

Signature of Owner

Date

Building Permit Number: _____



STATE LICENSING BOARD FOR RESIDENTIAL AND GENERAL CONTRACTORS
 237 Coliseum Drive, Macon, GA 31217
 478-207-2440
www.sos.ga.gov/plb

Authorized Permit Agent Form (ONE FORM PER PERMIT)

This form may be used by a qualifying agent to designate an individual to obtain a permit on his/her behalf for a project for the qualifying company. The contractor should submit an original Authorized Permit Agent Form for each project for which he/she has designated an individual to pull permits. This designated individual shall further be identified as the authorized permit agent. This notarized form with an **ORIGINAL SIGNATURE (no copies or faxes accepted)**, a copy of the contractor's license, a copy of the contractor's company license, and a copy of the driver's license of the authorized permit agent is to be given to the permit office in the city or county in which the project is located. **DO NOT SEND A COPY OF THIS FORM TO THE BOARD OFFICE UNLESS REQUESTED.**

License verification by permitting office should be completed by visiting <http://verify.sos.ga.gov/verification>

Name of Qualifying Agent:	
Contractor License # (Attach a copy of license.)	
Name of Licensed Company:	
Company License # (Attach a copy of license.)	
Name of Authorized Permit Agent: (Attach a copy of driver's license.)	

PROJECT (an original form is required for each project):

Company listed on contract:	
Property Owner's Name:	
Street Address:	
Apartment or Suite #	
City, State, Zip:	

I hereby designate the above listed Authorized Permit Agent to apply for and obtain the permit(s) for the project listed above. The undersigned, being licensed as a qualifying agent, do hereby affirm and swear, under oath, that all information on this form and on accompanying documents are true and correct.

 Original Signature of Qualifying Agent (no copies or faxes accepted)

State of _____ County of _____

NOTARY SEAL

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

_____ DAY OF _____, 20 _____

 NOTARY PUBLIC My Commission Expires: