

Hart County Building Permitting  
800 Chandler St  
Hartwell, Ga 30643  
[buildingpermitting@hartcountyga.gov](mailto:buildingpermitting@hartcountyga.gov)

**Application Checklist for Residential Additions and/or Renovation, out Buildings, or Commercial Structures**

The following list of documentation is required before a permit will be issued for additions, renovations, new out buildings or commercial structures. **Incomplete forms will not be processed and will delay permit issuance.** Please return this form with all permit application submittals. All documents must be legible.

- \_\_\_\_\_ Completed building permit application
- \_\_\_\_\_ Contractor licensing documentation (state license card, business license, driver's license)
- \_\_\_\_\_ Subcontractor licensing documentation (state license card, business license, driver's license)
- \_\_\_\_\_ GSWCC Level 1A certification (Blue Card)
- \_\_\_\_\_ Copy of recorded plat
- \_\_\_\_\_ One set of scaled construction drawings with dimensions (foundation plan and detail, floor plan of each level, elevations, and wall details)
- \_\_\_\_\_ House location plan; scaled lot drawing with a scaled footprint of house and any other structures located on property, show building limitations, setback requirements and erosion sediment control.
- \_\_\_\_\_ One copy set of GSWCC approved ESC plans for initial, intermediate and final phases (applicable for secondary and tertiary permit holders)
- \_\_\_\_\_ Verification of 911 addressing
- \_\_\_\_\_ Septic system inspection or re-evaluation from Environmental Health (if applicable)
- \_\_\_\_\_ Verification water/ sewer approval (if applicable)
- \_\_\_\_\_ Owners Affidavit (if homeowner is acting as contractor)

Project Address: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

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**New Single Family  
 Residential Building  
 Permit Application**

- Electrical
- Plumbing
- HVAC /Gas

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Permit No. \_\_\_\_\_

Estimated Cost of Construction (Labor and Materials): \$ \_\_\_\_\_

**JOB SITE ADDRESS:**

**Lot#:**

Subdivision Name:

Parcel ID #:

Zoning Class:

**Property Owner**

Name:

Address:

Zip:

Phone:

Email:

**General Contractor**

Name:

Ga License No.:

Address:

Zip:

Phone:

Email:

**Plumbing Contractor**

Name:

Ga License No.:

Address:

Zip:

Phone:

Email:

**Electrical Contractor**

Name:

Ga License No.:

Address:

Zip:

Phone:

Email:

**HVAC /Gas Contractor**

Name:

Ga License No.:

Address:

Zip:

Phone:

Email:

Building Height: \_\_\_\_\_

#Bedrooms \_\_\_\_ #Bathrooms \_\_\_\_

[ ] Total Electric [ ] Total Gas [ ] Both

Lot size: \_\_\_\_\_

[ ] Slab [ ] Basement [ ] Crawl

Gas Provider: \_\_\_\_\_

Flood Zone:  yes  no

Garage: [ ] Attached [ ] Detached

Electrical Provider: \_\_\_\_\_

Total Heated Sq. Ft.: \_\_\_\_\_

Total Unheated Sq. Ft.: \_\_\_\_\_

Notice: No changes shall be made from that which is stated in this application, or in attached plans and specifications, except by submitting a revised application, plans and/or specifications and receiving approval of the Chief Building Official for such change. Granting of a permit shall not be construed as a permit for or an approval of any violation of the Building Code or any other state or local law regulating construction or the performance of construction. I hereby certify that I have read and examined this application and the information provided herein is true and correct. I further certify that all construction will comply with the International Building Codes.

Signature of Applicant :

Date:

**FOR OFFICE USE ONLY**

Code Official Signature:

Administrative Fee:

Permit Fee:

Plan Review Fee:

CO Fee:

Total Fee:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_



HART COUNTY BOARD OF COMMISSIONERS  
ROAD DEPARTMENT  
800 CHANDLER STREET  
HARTWELL GA 30643  
706-376-1468  
www.hartcountyga.gov

## REQUEST FOR THE INSTALLATION OF A DRIVEWAY CULVERT

I, the undersigned applicant for a driveway culvert in Hart County, GA, do hereby certify that all of the following statements are true:

\_\_\_\_\_ I am the owner of the property, and my name as it appears on this request is the same as it is shown on the deed and/or property record at the Appraiser's Office.

\_\_\_\_\_ I have read and understand the Policy for Installation of Road Driveway Pipe

\_\_\_\_\_ I have provided the County with a copy of the plat for my property showing ownership, and which also shows that access is only possible from an adjacent County Road.

\_\_\_\_\_ I have placed flagging at the property corners adjacent to the County Road, and have also flagged the area where I would prefer the pipe be installed. I understand that the Road Department will make final determination of pipe location after inspecting the area.

\_\_\_\_\_ I understand that if more materials are required than are allowed by the policy, or that if I have a documented commercial or agricultural operation that I, the property owner, will reimburse the County for the additional materials at the County's cost.

ADDRESS OF PROPERTY: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Printed Name of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

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### Office Use Only

Request Received: \_\_\_\_/\_\_\_\_/\_\_\_\_

Work Order Issued: \_\_\_\_/\_\_\_\_/\_\_\_\_

# Hart County E-911

## New Address Request Form

Property Owner(s) Name: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone # Where You Can Be Reached: \_\_\_\_\_

Location of Property: \_\_\_\_\_

Tax Parcel # If Known: \_\_\_\_\_

Does Property Have Existing 911 Addresses:      Y / N

If Yes, What Are They? \_\_\_\_\_

### Information for Emergency Service Personnel

The following information can be used in better responding to emergencies.

Please check/list if any of the following apply to you or anyone in your household:

\_\_\_\_\_ Life Support Equipment                      \_\_\_\_\_ Physical Disability/Paralyzation

\_\_\_\_\_ Hearing Impaired                                      \_\_\_\_\_ Dementia/Alzheimer's

\_\_\_\_\_ Speech Impaired                                      \_\_\_\_\_ Sight Impaired

List any other medical conditions, special circumstance and/or emergency contact #'s that you may want responding agencies to be aware of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List any hazardous materials that may be stored on the property, e.g. propane tanks, diesel storage, etc.: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**PROPERTY OWNER AFFIDAVIT**

**NOTICE:** The State of Georgia has mandated that all residential contractors be licensed effective July 1, 2008. However, there is an exemption to this law that allows you, as the property owner to act as your own contractor without a license, provided the construction is intended for your own use or occupancy and you have not sold a building or structure and acted as contractor within the prior 24 months. In acting as your own contractor, you are responsible for the supervision and management of all work that is not performed by a licensed contractor. Furthermore, you are responsible for requesting inspections and being on site during inspections if deemed necessary by the inspector. All work must conform to all applicable laws, ordinances, building codes and zoning regulations. Please familiarize yourself with the appropriate codes and laws to insure that all work will be done properly. In the event that you should feel you are unable to comply with the requirements as stated, it will be necessary for you to hire a licensed contractor to complete the job in compliance with all building codes and ordinances in effect.

This form must be completed, signed, notarized and submitted to the Building Official before a permit will be issued. *All information requested on this form is mandatory:*

Jobsite Address: \_\_\_\_\_

Lot/Bldg/Ste: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Description of Work: \_\_\_\_\_

This is to certify that I am responsible for the:

- Electrical     Plumbing     Mechanical     Building     Low Voltage     Other

I certify that I have a working knowledge of all construction codes and ordinances adopted by Hart County relating to this project. In the event there is a change in my status on this project, I understand that I will be held responsible for all indicated work at this job until the Building Official has been notified, in writing, of any change. I understand that this permit may be revoked for false statements or misrepresentation as to the material fact in the permit application on which this permit was based. I further agree to indemnify Hart County and its operator from any liability for damages and loss of property if the work performed has not been installed in accordance with the construction codes and ordinances.

SIGNATURE/ DATE: \_\_\_\_\_ / \_\_\_\_\_

Sworn to and subscribed before me.

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Notary Public – Please notarize with official seal)