



Application Procedures for Alarm System

Locust Grove Community Development Department
P.O Box 900
3644 Hwy 42
Locust Grove Ga. 30248

Inspection • Permits • Final Plats • Plan Review

(770) 692.2321 Phone
(770) 692.2327 Fax

To whom it may concern:

Attached are the forms you will need at the time any Sprinkler plans are submitted to the Locust Grove Building Department. We are here to serve you! Therefore, please contact this department should you have any questions or concerns.

When requesting a Fire Alarm Permit in Locust Grove you must submit the following information:

- **Three set of fire alarm drawings. All fire alarm permits are issued on Electrical permit.**
- **Proper paperwork. (*Commercial Route Sheet, Electrical Permit Application*)**
- **Current Business License, State Card and Driver License .**

Always ask a Representative in our department when in question.

We will not be able to accept plans for review until such information is provided. Once all of the proper paperwork has been submitted we will be able to "start" the process of Plan Review. The plans are distributed to the Henry County Fire Department. Please allow 8-10 working day once the plans have been properly submitted.

Again this is only to start the process of the review. Should you have any question do not hesitate to contact the Fire Department at 678-583-3687.

Thank you,



Application for
SPECIALIZED PERMIT

Residential
 Commercial

Master Permit #: _____ Permit #: _____

(Please Print)

Contractor: _____

Address: _____ City & State _____ Zip _____

Phone: _____ Fax: _____ E-Mail _____

D.L # _____ Exp: _____ State _____

Contractor's Current *Georgia* State ID # _____ Exp: _____

Occupational Tax: County _____ Number: _____ Exp: _____

(Please attach copies)

Is this a repair, remodel, replacement or gas line for swimming pool? Yes (or) No
If yes, please attach copy of state card.

Owner of Structure: _____ Business name: _____

Project Address: _____ City & State _____ Zip _____

Estimated cost of construction: _____ Total square footage: _____

Subdivision (if applicable) _____ Lot No: _____

24 Hour contact information:

Name: _____ Phone or Cell _____

| PROJECT TYPE | FEE PER TRADE | <input checked="" type="checkbox"/> All that apply |
|--|--|--|
| Temporary Service Pole | \$35.00 | |
| Demolition Permit | \$65.00 | |
| Swimming Pool Permit (In Ground) | \$250.00 | |
| Swimming Pool Permit (Above Ground) | \$125.00 | |
| Utility Release | \$65.00 | |
| Fire Sprinkler | \$50.00 | |
| Fire Damage Preliminary Inspection | \$50.00 | |
| Move-in Structure Preliminary Inspection | \$50.00 | |
| Move-in Structure Building Permit | \$250.00 | |
| Industrialized Building (Construction, Temporary Occupancy) | \$100.00, plus applicable Trade Permit | |
| Garage, Storage, and Accessory Structures (Residential, detached) | Minimum fee of \$50.00 or \$0.15 per square foot (Total), plus applicable Trade Permit | |
| Garage, Storage, and Accessory Structures (Nonresidential, detached) | Minimum fee of \$50.00 or \$0.15 per square foot (Total), or Valuation permit fee in (B), whichever is greater, plus applicable Trade Permit | |
| Low-Voltage (Alarm, Telephone, Cable, Fiber) | \$50.00 | |
| Total | | |

Signature: _____ Date: _____

**Checks made payable to: City of Locust Grove, P.O. Box 900, 3644 Hwy 42 S., Locust Grove, Georgia 30248



PUBLIC NOTICE

*TO: BUILDERS, DEVELOPERS, CONTRACTORS AND
SUBCONTRACTORS.*

FROM: COMMUNITY DEVELOPMENT DEPARTMENT

SUBJECT: TRADE PERMIT

Effective January 1, 2002 the following items will be needed for a trade permit
(Electrical, plumbing or mechanical):

A legible copy of the tradesmen's current:

STATE CARD, BUSINESS LICENSE AND VALID DRIVERS LICENSE.

These items must accompany each application to be accepted for processing. A copy of these items will need to be submitted with each permit that is applied for.

Dept: _____

Due: _____

Purpose of Permit:

- Shell Only
- Complete Structure for C. C.
- Complete Structure for C.O
- Vanilla Box (Int. Fin./ No Tenant)
- Interior Finish for Leased Tenant
- Other

LOCUST GROVE COMMERCIAL BUILDING PERMIT ROUTING SHEET

Project Name: _____

Project Address: _____

City: _____ Zip Code: _____

Type of Business: _____

Permit Owner: _____ Ph#: _____

Address: _____

Contact Person: _____ Ph #: _____

Alternate Person: _____ Ph #: _____

Submitter's Signature: _____ Submitter's Title: _____

Office Use Only From This Point Forward:

Plans Received For Review: _____ Plans Sent to Fire Marshall: _____

Plans Returned From Fire Marshall: _____ Resubmittal Required: Yes No

Building Department Resubmittal Required: Yes No

Resubmittal Date: _____ Sealed Structural Plans Required: Yes No

Occupancy: A B E F H I M R S Misc.

Type of Construction: I II III IV V 1-Hr (A) Unp. (B)

Size of Structure: _____ Valuation Per Sq. Ft.: _____ Est. Valuation: _____

Permit Cost: _____ Plan Review Fee (25% of permit cost) _____

Type of Payment: check _____ cash _____ Amount Paid: _____ Rec'd by: _____

Fire Safety & Accessibility Fee: \$ _____ Fire Department Occupancy No.: # _____

Development Permit Req'd: Yes No Dev. Permit #: _____ Date: _____

Sewer Tap Fee Required: Yes No L.L.: _____ Dist: _____

Water Tap Fee Required: Yes No Parcel ID # _____

Septic Tank Permit Req'd? Yes No Zoning: _____

Pre-Construction Meeting Req'd? Yes No Zoning Approval & Date: _____

SET BACKS PER ZONING: FRONT _____ REAR _____ LEFT _____ RIGHT _____

Comments: _____

Building Impact Fee Cost: _____ How Paid: _____

Building Dept. Staff Signature: _____

Date Signed: _____