

RESIDENTIAL BUILDING PERMIT APPLICATION - Non Refundable

Please Print Clearly or Type	Contract Value of Work: \$ _____		Fee Adjustment \$ _____		Approved By: _____	
	PROPERTY ADDRESS					
	Number and Street Name _____				Zip Code _____	
	Map Number _____			Lot Number _____		Subdivision Name _____
	Ownership is: <input type="checkbox"/> Private <input type="checkbox"/> Public (Government)					
Property Owner	Name		Mailing Address – Number, Street, City, ST & Zip Code		Telephone Number	
	First	Last				
Agent	Company or Relationship to Applicant					
	First	Last				
Engineer or Architect	Company					
	First	Last	TN State Lic. #			
Contractor	Company					
	First	Last	TN State Lic. #		Worker's Comp? Yes <input type="checkbox"/> Exempt <input type="checkbox"/>	
Applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Tenant <input type="checkbox"/> Agent						

TYPE OF IMPROVEMENT		Proposed Starting Date: _____	Completion Date: _____
<input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair / Replace <input type="checkbox"/> Moved Structure <input type="checkbox"/> Manufactured			
OCCUPANCY		NEW BUILDING/STRUCTURE SIZE	
<input type="checkbox"/> Single Family Detached <input type="checkbox"/> Garage / Carport Detached <input type="checkbox"/> Single Family Attached <input type="checkbox"/> Swimming Pool <input type="checkbox"/> 2 Family Residential <input type="checkbox"/> Mobile Home <input type="checkbox"/> Accessory Structure <input type="checkbox"/> Storage Structure <input type="checkbox"/> Garage / Carport Attached		Width _____ ft Depth _____ ft Height _____ ft No. of Stories _____	
PRINCIPAL TYPE OF FRAME		No. of Bedrooms _____	
<input type="checkbox"/> Steel Frame <input type="checkbox"/> Masonry / Concrete <input type="checkbox"/> Wood Frame <input type="checkbox"/> Other _____		No. of Parking Spaces _____	
		Fire Sprinklers? How Many _____	

SETBACKS FROM PROPERTY LINE TO NEW STRUCTURE/ADDITION Front _____ ft Rear _____ ft Left Side _____ ft Right Side _____ ft Side Street _____ ft	What is to be built, installed, moved, repaired, renovated or demolished? Explain in detail. _____ _____ _____ _____ _____ _____ _____ _____	THIS DOCUMENT BECOMES THE BUILDING PERMIT WHEN SIGNED BY THE LAKESITE BUILDING OFFICIAL. _____ CITY OF LAKESITE, BUILDING OFFICIAL _____ DATE
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City of Lakesite, TN
9201 Rocky Point Rd, Lakesite, TN 37379
Phone: (423) 842-2533 Fax: (423) 842-8110
Hours: Mon-Thurs 9:00 a.m. – 2:00 p.m. Fri 9:00 a.m. – Noon

PERMIT NO. B- _____
Date _____
Fee \$ _____

DISCLAIMER

The granting of a permit does not affect any rights third parties may have pursuant to deed restrictions, covenants running with the land or other private arrangements.

****IMPORTANT: FOR DEMOLITIONS, ALL MOVES, AND ALTERATION OF INSTITUTIONAL, RESIDENTIAL WITH MORE THAN FOUR (4) DWELLING UNITS, INDUSTRIAL, OR COMMERCIAL PROPERTIES: A building permit shall not be valid until final approval to proceed is received from the Air Pollution Control Bureau. To avoid costly non-compliance penalties, call 423-668-2567 if you have any questions.****

Any permit issued shall become invalid if authorized work is not commenced within 30 days after issuance of if work is suspended or abandoned for a period of six (6) months. A permit is issued with the distinct understanding that the building for which this permit is issued is to be built in strict accordance with all adopted codes of the City of Lakesite, TN. Persons performing construction work under any permit must observe all Federal, State and local codes.

The undersigned does hereby declare that the statements contained in this document, those submitted with this document, and on the reverse side hereof, are true and correct to the best of his or her knowledge, information and belief.

Print Name

Phone Number

Owner or Agent Signature

Date

(OFFICE USE ONLY)

ISSUANCE FEE - \$35.00
BUILDING FEE - \$ _____
PLAN REVIEW FEE \$ _____ (if applicable)
CERTIFICATE OF OCCUPANCY \$ _____ (if applicable)
Other Fees:

TOTAL BUILDING PERMIT FEES \$ _____

Paid _____

BUILDING PERMIT FEES	
Title 12, Chapter 1, Section 12-103	
VALUE	Cost
Issuance Fee	\$35.00
\$0.00 to \$2,500	\$0.00
\$2,501 up to and including \$15,000	\$5.00/\$1000 or fraction thereof
\$15,001 up to and including \$100,000	\$60.00 for first \$15,000 plus \$3.00 for ea addl thousand or fraction thereof
\$100,001 up to and including \$500,000	\$315.00 for first \$100,000 plus \$1.00 for ea addl thousand or fraction thereof
\$500,001 up to and including \$1,000,000 (one million)	\$715.00 for the first \$500,000 plus \$0.50 for ea addl thousand or fraction thereof
\$1,000,000 (one million) and over	\$965.00 for the first million plus \$1.00 for ea addl thousand or fraction thereof
Title 12, Section 12-103	
Demolition Permit	\$100.00
Certificate of Occupancy (existing facility)	\$50.00
Certificate of Occupancy (new facility)	\$10.00
Certificate of Occupancy (conditional)	\$50.00
Certificate of Occupancy (beverage license)	\$25.00
Certificate of Completion	\$10.00
Fee for Zoning Letter	\$50.00
Fee for modular home site investigation	\$25.00
Plan checking fee (commercial)	30% of building permit fee
Plan review fee-based construction (commercial)	50% of building permit fee
Cell tower site review fee	\$100.00
Cell tower technical location requirements	\$1,500.00