

BUILDING/ZONING PERMIT APPLICATION & PLANS SUBMITTAL FORM CITY OF LAKESITE BUILDING and CODES DEPARTMENT - 9201 Rocky Point Rd., Lakesite, Tn 37379 423-842-2533 Mon-Thurs 9:00 am-2:00 pm Fri 9:00 am to Noon PLEASE WRITE LEGIBLY				BUILDING PERMIT NUMBER #
PROJECT ADDRESS:				PAID (Date)
APPLICANT/PERMIT HOLDER	Property Owner?	Contractor?	Architect?	CK #
PROPERTY OWNER	NAME:			Permit Fee \$45.00
	ADDRESS:			Const Fee \$
	PHONE:			Other \$
				Other \$
ENGINEER OR ARCHITECT (if Not Applicable, note with N/A)	NAME:			Total \$
	ADDRESS:			
	PHONE:			Copy of your check on back as receipt
	TN LIC. #:	LICENSE CLASS:		
PROJECT CONTACT or AGENT	NAME:			Please schedule inspections at least 24 hours in advance
	ADDRESS:			
	PHONE:			
	TN LIC. #:	LICENSE CLASS:		See pg 2 for Bldg Inspector Sign Off
GENERAL CONTRACTOR	NAME:			
	ADDRESS:			
	PHONE:			
	TN LIC. #:	LICENSE CLASS:		
PROJECT DESCRIPTION- What is to be built, installed, moved, repaired, renovated or demolished:				
TYPE OF WORK		BUILDING TYPE	BUILDING INFORMATION	
New Construction		Single Family Detached Garage	Building Type	
Addition		Single Family Attached Garage	Construction Type	
Alteration		2 Family Residential	Occupancy Load	
Repair/Replace		Accessory Structure	Total Exit Width	
Moved Structure		Garage/Carport Attached	Sprinkler System	
Manufactured		Garage/Carport Detached	Fire Alarm System	
TYPE OF FRAME		Swimming Pool	Bldg Height-FT	
Steel Frame _____ Wood _____		Mobile/Manufactured Home	Bldg Height-Stories	
Masonry/Concrete _____ Other _____		Storage Structure	Const. Area Sq Ft	
CONTRACT VALUE OF WORK		OCCUPANCY TYPE	IBC-Commercial-Classification	
		IRC-Residential	Assembly	Mercantile
\$		1 or 2 Family Dwelling or Townhouse	Business	Residential
		Detached _____ Attached _____	Education	Storage
		No. of Units/Structure _____	Factory	Utility
			Institutional	CIRCLE ONE

BUILDING AREA	SQUARE FEET	ESTIMATED CONSTRUCTION COST
Entire Building Footprint (Area in Square Feet) (include; unfinished basement, porches, decks & garages)		\$

BUILDING PERMIT FEE SCHEDULE (payable at permit issuance)

Issuance Fee	\$45.00
\$0.00 to \$2,500	\$0.00
\$2,501 up to and including \$15,000	\$5.00 per \$1000 or fraction thereof
\$15,001 up to and including \$100,000	\$168.00 for first \$15,000 plus \$3.00 for each additional thousand or fraction thereof
\$100,001 up to and including \$500,000	\$315.00 for first \$100,000 plus \$3.00 for each additional thousand or fraction thereof
\$500,001 up to and including \$1,000,000 (one million)	\$1,500.00 for the first \$500,000 plus \$3.15 for each additional thousand or fraction thereof
\$1,000,000 (one million) and over	\$3,100.00 for the first million plus \$1.00 for each additional thousand or fraction thereof

PLAN REVIEW FEE

FEES: Estimated cost: \$ Plan review fee: \$ Total Fee - \$

Architectural Plans	Mechanical Design Plans	Fire Sprinkler Plans
Life Safety Plan	Plumbing Design Plans	Other:
Structural Design Plans	Electrical Design Plans	
For Retaining Wall(s)	Site Plan Approval Date:	Grading Permit Issue Date:

PLAN SUBMITTAL: Not required, call for information if not submitting electronically.

ELECTRONIC SUBMITTAL: Submit one (1) CD or email of drawings and specifications in PDF format. The drawings must be in a single file and the specifications in a separate single file. Please ensure that all pages of drawings and specifications are oriented such that the top of the sheet appears at the top of the monitor.

ZONING DISTRICT:	Current Zoning:
PROPERTY DIMENSIONS	IS A ZONING PERMIT REQUIRED? Proposed Zoning: _____
	Lot Size: _____ Lot Dimensions: _____
	Primary Bldg Setback from Property Lines Front _____ft Rear _____ft
	Left Side _____ft Right Side _____ft

CERTIFICATION: I hereby certify that I have the authority to make the foregoing application, that the application information is correct, and that the construction will conform to the regulations of the current adopted codes and ordinances of the City of Lakesite. NOTE: This permit shall become invalid if the authorized work is not started within six (6) months from the date issued, and/or if the authorized work is suspended for a period of six (6) months after the time for commencing the work. I acknowledge that granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. Approval subject to proper submittal of licensing and Worker's Compensation documentation.

Applicant Signature	Date	Issuance Fee: \$45.00
Building Official Approval	Date	Permit Fees: \$
Zoning Approval	Date	Other Fees: \$
		TOTAL FEES DUE \$

CITY OF LAKESITE CODES DEPARTMENT
 9201 Rocky Point Road, Lakesite, TN 37379 423-842-2533
RESIDENTIAL SITE PLAN
 TO BE USED WITH RESIDENTIAL BUILDING PERMIT APPLICATION

DATE

PROJECT ADDRESS:

**PROPERTY
OWNER**

Name Number and Street City State Zip Phone

**GENERAL
CONTRACTOR**

Name Number and Street City State Zip Phone

LOCATION SITE PLAN

REAL PL



FRONT PL

STREET

NOTES: