



City of McDonough  
Community Development-Building & Inspections Division  
136 Keys Ferry Street, 3<sup>rd</sup> Floor, McDonough, GA 30253  
Office: (470) 878-1114 Fax: (678) 432-4665

**COMMERCIAL BUILDING PERMIT CHECKLIST**  
(check only those applicable items)

**PROJECT NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

- ZONING VERIFICATION FORM COMPLETED BY ZONING STAFF**
- Approved Façade review by Planning and Zoning Division **prior to** building plans submittal.
- SIX (6) SETS** of building plans AND an **ELECTRONIC COPY**
- Completed Applications and all paperwork.  
Permit Application, Inspection Affidavit, Contractors Affidavit (if applicable), Copy of Georgia State Contractors License with Driver's License, Copy of Georgia State Occupational Tax License
- NESHAP survey (i.e., asbestos/ lead paint/ hazardous materials) must be submitted for all demolitions per Federal Regulations. A separate Demolition application/permit is also required.
- Fees will be totaled once the plans have been approved by all departments and will be paid at issuance of permit.  
Fees involved include (1) Plan Review, (2) Building Permit, (3) Building Impact Fee (if applicable), and (4) City of McDonough Fire Department  
**NOTE: The above fees do not include other departments such as Planning & Zoning, Henry County Water Authority, Henry County Health Department, etc.**
- I UNDERSTAND ALL OF THE ABOVE REQUIREMENTS AND AGREE TO SUBMIT ANY OTHER DOCUMENTS REQUESTED BY THE CITY OF MCDONOUGH.**

---

APPLICANT – PLEASE PRINT NAME

---

APPLICANT'S SIGNATURE

**PLEASE ALLOW FOURTEEN (14) BUSINESS DAYS FROM THE DATE OF SUBMITTAL FOR ANY COMMENTS.**

**THE PERMIT COORDINATOR WILL CONTACT THE APPLICANT WHEN THE PLAN REVIEW IS COMPLETE.**



City of McDonough  
Community Development – Building Division

**COMMERCIAL BUILDING PERMIT AFFIDAVIT**

I, \_\_\_\_\_, do hereby understand that before submitting this project I may choose to schedule a meeting with the departments involved to discuss the details on the construction plans. This is by choice and is not mandatory. The following items “will” be required at the time of the initial submittal (if applicable).

Pre-Review Meeting Scheduled: Yes or No

**STEP ONE (please submit the following):**

1. Project Name: \_\_\_\_\_
2. Address & Parcel ID#: \_\_\_\_\_
3. Verification of Zoning Complete by Property Owner or Tenant: \_\_\_\_\_
4. Key Plan w/Addresses (if applicable): \_\_\_\_\_
5. Completed Application: \_\_\_\_\_
6. Copy of Contractor’s Current; GA Business License\_\_\_\_\_ / State License\_\_\_\_\_ /Picture ID: \_\_\_\_\_
7. Inspection Affidavit Completed: \_\_\_\_\_
8. Application for Demolition Permit if applicable \_\_\_\_\_

**\*NOTE:** The Zoning must be verified by the City of McDonough, Planning & Zoning Division prior to submitting any plans for review. Please contact the Planning & Zoning at 678-432-4622 should you have any questions.

**STEP TWO:**

Once the above items have been received, FIVE (5) complete sets of plans along with two (2) copies of the overall site plans (SITE PLANS ARE ONLY NEEDED ON STAND ALONE BUILDINGS AND ADDITIONS) need to be submitted to the Permit Coordinator. Review may take up to fourteen (14) days. The following items will be required before a pre-construction meeting can be scheduled, and a Commercial Permit is released. Please work on securing the following items while plans are under review.

1. Water Meter/Sewer Impact Fee receipt or a letter from H.C.W.S.A (see Niki Jarrard – 678-583-2436, or [susan.jarrard@hcwa.com](mailto:susan.jarrard@hcwa.com) if applicable).
2. Public Works Director (if applicable).

**STEP THREE:**

Once all items are received and the plans are approved the Permit Coordinator will contact the customer to schedule a pre-construction meeting and at that time, they will be given the total due for the permit fees. All fees will be taken at the pre-construction meeting. (We accept cash, check or money order).

Submitted to the City of McDonough Building Department this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Customer Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Witnessed: \_\_\_\_\_ Title: \_\_\_\_\_



City of McDonough  
*Community Development – Building Division*

## PRE-CONSTRUCTION AFFIDAVIT

This affidavit must be submitted before a Building Permit is issued.

Project Name: \_\_\_\_\_

Job Site Address: \_\_\_\_\_

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

Owner's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contractor: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

- When applicable, the City of McDonough must secure approval from outside agencies prior to approval of a final inspection: Henry County Health Dept. and/or Henry County Water & Sewer Authority
- **Inspection request called in before 4:00 p.m. to 678-782-6217, will be scheduled to be done the following working day, time permitting. Appointment times for inspection will not be made.**
- Inspection requests will not be accepted over cell phones.
- Third Party inspections are not accepted without prior approval from the Building Official.
- Pictures, of any form, are not accepted in lieu of an inspection.
- Must secure a proper permit prior to the commencement of any SITE or PREP work; any work performed without proper permits shall result in double permit fees.
- Cover-up item(s) that are required to be inspected but have not received or passed an inspection will result in a “Stop Work Order” being issued and the uncovering of item(s).
- **Sub-Contractor(s) are responsible for pulling their own permits; any work performed without proper permits shall result in double permit fees.**
- Permit Cards must be posted and official date stamped/approved plans by the City of McDonough must be available on-site prior to any inspections.
- Signs must be permitted separately. Contact Tina Tebo, Community Development Secretary at 678-432-4622, ext. 2111.
- **All applicable BMP's (Best Management Practices) must be maintained for the duration of the above-mentioned project.**
- **On-Site restroom facilities must be provided and maintained at all times.**

I hereby acknowledge and understand the above procedures. Be it understood that I will also inform all contractors on this job site of these procedures.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_



**City of McDonough Building & Inspections Division**  
**136 Keys Ferry Street 3rd Floor, McDonough, GA 30253**  
**Phone (470) 878-1114 Fax (678) 432-4665**  
**APPLICATION FOR COMMERCIAL BUILDING PERMIT**

**MINIMUM PERMIT FEE  
\$75.00**

**PENALTY FEES WILL BE ASSESSED ON  
ANY WORK PERFORMED PRIOR TO  
OBTAINING PERMIT(S)**

PERMIT NO.: \_\_\_\_\_

DATE: \_\_\_\_\_

FORM OF PAYMENT: CASH: \_\_\_\_\_ CHECK: \_\_\_\_\_

**THIS APPLICATION SHALL BE MADE IN ACCORDANCE WITH APPLICATION REQUIREMENTS OF THE CITY OF  
MCDONOUGH'S CODE FOR A PERMIT TO CONSTRUCT, ENLARGE, REPAIR, ALTER, MOVE, DEMOLISH, OR CHANGE  
THE OCCUPANCY OF ANY BUILDING OR STRUCTURE.**

**PROJECT NAME:** \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARCEL ID NO.: \_\_\_\_\_ TYPE OF BUSINESS: \_\_\_\_\_

**BUILDING OWNER:** \_\_\_\_\_

PRIMARY ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

**BUSINESS OWNER'S NAME:** \_\_\_\_\_

PRIMARY ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PROJECT DESCRIPTION: TYPE OF CONSTRUCTION: I II III IV V (A) (B)**

**SIZE PROJECT: (SQ. FT.)** \_\_\_\_\_

**TYPE OF OCCUPANCY: A B E F H I M R S Misc.**

**ESTIMATED COST OF CONSTRUCTION: \$** \_\_\_\_\_

**PURPOSE OF PERMIT (Please Check One):**

<input type="checkbox"/> Addition & Renovation	<input type="checkbox"/> Complete Structure for C/O	<input type="checkbox"/> Demolition	<input type="checkbox"/> Sprinkler	<input type="checkbox"/> Other
<input type="checkbox"/> Shell only	<input type="checkbox"/> Interior Build-Out for Tenant	<input type="checkbox"/> Ground Sign	<input type="checkbox"/> Vanilla Box	

**SANITARY FACILITIES ( ) Septic Tank ( ) City Sewer ( ) City Water ( ) County Water ( ) County Sewer ( ) Other**

The applicant shall be responsible from the date of this application or from the time of the beginning of the first work, whichever shall be earlier, for all injury or damage of any kind resulting from this work, whether for basic services or additional services, to persons or property. The applicant shall exonerate, indemnify and save harmless the City of McDonough from and against all claims or actions and all expenses incidental to the defense of any such claims, litigation and actions based upon or arising out of damage or injury (including death) to persons or property caused by or sustained in connecting with the performance of Development Permit or by conditions created thereby or arising out of or anyway connected with work performed under the permit or for any and all claims or damages under the laws of the United States or of Georgia out of or in any way connected with the acquisition of and construction under the permit and shall assume pay for without cost to the City of McDonough, the defense of any and all claims, litigations, and actions suffered through any act or omission of the applicant or/and subcontractors or anyone directly or indirectly employed under the supervision of any of them.

I hereby certify that I have examined and understand all information on this application and that the above statements and information supplied by me are true and correct. To the best of my knowledge, all provision of laws and ordinances governing work to be performed shall be complied with weather specified herein or not.

**PLEASE PRINT**

**APPLICANT'S SIGNATURE**

**DO NOT WRITE BELOW THIS LINE – OFFICIAL USE ONLY**

Proper License Verified by Staff: YES \_\_\_\_ NO \_\_\_\_ Date: \_\_\_\_\_ Cost of Permit: \$ \_\_\_\_\_

Zoning: \_\_\_\_\_ Date Zoning Verified: \_\_\_\_\_ Cost of City Fire Safety/Plan Review Fee: \_\_\_\_\_

Development Permit No. \_\_\_\_\_ Date Issued: \_\_\_\_\_ Impact Fees Required: YES \_\_\_\_ NO \_\_\_\_

Cost of Plan Review: \$ \_\_\_\_\_ Cost of Impact Fees: \$ \_\_\_\_\_

**PERMIT APPROVED BY:** \_\_\_\_\_

**PERMIT ISSUED BY:** \_\_\_\_\_



**Community Development  
Planning and Zoning Division  
136 Keys Ferry Street, 3<sup>rd</sup> Floor  
McDonough, GA 30253**

**ZONING AND LAND USE VERIFICATION FORM**

**APPLICANT – COMPLETE THE FOLLOWING (if applicable or indicate by writing N/A): (Picture ID required)**

Reason for Request:  New Business  Building Permit  Alcohol License  Name Change only

Property or Business Owner: \_\_\_\_\_

First Name

Last Name

24 Hour Contact Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Property Address: \_\_\_\_\_

Number

Street

Suite #

Name of Business: \_\_\_\_\_

Shopping Center or Subdivision Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Describe the operations of the business: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Note: All signage requires a permit; any signage placed on property without proper permits will incur double fees. Please contact the Planning and Zoning Division on the 3<sup>rd</sup> floor to obtain an application and processing guidelines. Initials \_\_\_\_\_.**

The determination of zoning compliance does not constitute approval of occupancy or approval of a business license; nor does it release the applicant from having to obtain a business license, building permit, Certificate of Occupancy, sign permit, and/or all other necessary permits required by local, state, or federal jurisdiction.

**STAFF USE ONLY - DO NOT WRITE BELOW THIS LINE**

Parcel Tax ID #: \_\_\_\_\_

Present Zoning: \_\_\_\_\_ with conditions/variances  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Official Signature: \_\_\_\_\_ Date \_\_\_\_\_



*Community Development Department  
Building and Inspections Division*

136 Keys Ferry Street, 3<sup>rd</sup> Floor McDonough, GA 30253  
Phone (678) 432-4622 Fax (678) 432-4665

## **PUBLIC NOTIFICATION**

### **RE: Verification of service delivery – United States Postal Service (USPS)**

Attn: Developers, Builders and Members of the Public

Developers, Builders, and other members of the public are advised that the United States Postal Service (USPS) requires “method of service delivery” verification, per its 2011 regulatory policies.

In order to obtain the required verification, please take the following steps:

- 1.) Review the policies and/or regulations pertaining to USPS service delivery, particularly Centralized Mail Delivery, prior to scheduling a consultation with the McDonough Post Office.
- 2.) Schedule a consultation with the McDonough Postmaster or his/her designee, in accord with USPS policies, for review of existing and/or proposed development. Upon completion of the consultation, you will be issued an approval letter by the McDonough Postmaster for the type of delivery that is agreed upon.
- 3.) The submittal of a legible, color copy of the Postmaster’s approval letter is to then be filed with the McDonough Community Development Department’s Planning & Zoning Division Permit Coordinator.

Please note a building permit will not be required for installation of a USPS Centralized Mail Kiosk, if Centralized Mail is stipulated by the USPS; however, permits for the Façade and Building will be required for any accessory structure(s) to provide overhead shelter/protection.