



**MCDUFFIE COUNTY PLANNING COMMISSION**  
**210 RAILROAD STREET, THOMSON, GEORGIA 30824**  
**(706) 595-5355, FAX (706) 595-4204**

☐ City of Thomson

**BUILDING PERMIT APPLICATION**

☐ McDuffie County

**Note: Before Building Permit Must Have Driveway Installed**

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

Permit # \_\_\_\_\_

Property Location: \_\_\_\_\_  
(Road/Street) (Subdivision) (Lot)

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

Applicant's Address: \_\_\_\_\_

Appl. Ph. #: \_\_\_\_\_ Applicant Email: \_\_\_\_\_

Property Owner: \_\_\_\_\_  
(If other than Applicant above.)

Owner's Address: \_\_\_\_\_ Ph. # \_\_\_\_\_

☐ Agriculture **[Structure Use Type]**  
☐ Single Family Residential ☐ Industrial ☐ Special Purpose  
☐ Two Family Residential ☐ Institutional ☐ Other: \_\_\_\_\_  
☐ Multi-Family Residential ☐ Public  
☐ Commercial ☐ Sign

**[Type Work]**  
☐ New Construction ☐ Addition **Cost of Work: \$** \_\_\_\_\_  
☐ Repair ☐ Alteration/Remodel **Number of Bedrooms:** \_\_\_\_\_  
☐ Move ☐ **DEMOLITION?** **Total Sq. Ft.** \_\_\_\_\_ **Heated:** \_\_\_\_\_  
☐ Accessory ☐ Other: \_\_\_\_\_ **Permit Amount: \$** \_\_\_\_\_

Gen. Contractor: \_\_\_\_\_

**Describe Work:** \_\_\_\_\_

**Caution:**

- 1.) Separate permits are required for BUILDING, ELECTRICAL, PLUMBING, and MECHANICAL work.
- 2.) This permit becomes null and void if work or construction is not commenced within six (6) months from the date of permit purchase, or if construction or work is suspended or abandoned for a period of one (1) year at any time after work is commenced.
- 3.) Owner/Applicant/Contractor agrees to call for all building, electrical, plumbing, and mechanical inspections required by the City of Thomson and/or McDuffie County. Failure to call for inspection(s) will subject owner/contractor to the revocation of the permit and/or prosecution.

Conditional Requirements: This permit is being issued contingent upon warranty of full and satisfactory compliance with the conditional requirements noted below. Should property owner and/or applicant be unwilling or fail to comply with the conditional requirement(s) indicated below, the issuance of any permits shall be deemed null and void and shall subject the owner and/or applicant to the revocation of the permit and/or prosecution.

Acknowledgment Signature: \_\_\_\_\_

**Warranty:**

I hereby certify that I have read and examined this application and know the information contained thereon to be true and correct. I understand that the granting of a permit does not waive the provisions of any other State or local law regulating construction or the performance of construction. I acknowledge that I understand and agree to all of the conditions set forth and that acknowledgment by signature below shall constitute acknowledgment by all parties involved.

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

**FOR OFFICE USE ONLY:**

**[Health Site Approval]**

Water Source: ☐ Well (Existing) ☐ (New) ☐ Municipal Water  
Sewage: ☐ Septic Tank (Existing) ☐ (New) ☐ Municipal Sewer

Health Site Approved: Date: \_\_\_\_\_ By: \_\_\_\_\_

**[Misc. Requirements]**

NOTE: DRIVEWAY APPROVAL ☐ GDOT ☐ MC Road Dept. ☐ Fire Prev Bureau ☐

Setbacks Confirmed: ☐ City ☐ County Front: \_\_\_\_\_ Side/Rear: \_\_\_\_\_

Most current recorded plat attached: \_\_\_\_\_ Buildable Lot: \_\_\_\_\_ Zoned: \_\_\_\_\_

Minimum Lot Size: \_\_\_\_\_ Required Frontage: \_\_\_\_\_ Maximum Height: \_\_\_\_\_

☐ Land Use/Zoning Approved

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_