

This application is not a permit until fees are received and drawings/plans (if applicable) are approved. Any work prior to permit issuance is prohibited. Permits are non-transferable and Fees are Non-Refundable! All permit applications are to be completed and submitted through the BS&A Online Permitting Portal: <https://bsaonline.com/?uid=2757>

PROJECT ADDRESS:

Unit/Suite/Apt#:

Parcel:

☐ **Residential**

Project Description / Full Scope:
(Required):

ESTIMATED VALUE (Required):
(Total Value of Job *minus* Mechanical, Electrical, Plumbing, Sprinklers, Fire Alarm)

\$ _____

Structure Type and Info (Required):

After project is done, the property will be or remain a/an:

- ☐ ADU / Habitable Accessory Structure
☐ Single Family Home
☐ Duplex

Multiunit:

- ☐ Townhome(s):
☐ Attached
☐ Detached

Structure Info (Required):

_____ # Units
_____ # of Floors
_____ Total Occupied Sq FT
_____ Bedrooms _____ Bathrooms
_____ Offices / Suites (Commercial)
_____ # of Parking Spaces
_____ # of Buildings (Apartment Complex)

Construction Type: _____

Occupancy Load: _____ Occupancy Type: _____

Building Permit Type (Required):

*** - Requires plan review. No Hardcopies of plans accepted! All drawings must be uploaded into the [BS&A portal](#) in scalable digital format. (See Drawing Submittal Guide for drawing requirements)**

**** - Requires additional [East Point Forms](#)**

A. New Construction

Requires CO to be issued for each individual structure and/or unit (See/Complete CO page of this application!):

*Residential Dwelling(s)

☐ Single Family Home:

☐ Multiunit:

- Beginning Unit

- End Unit

(Submit a spreadsheet of all unit addresses WITH application)

The attached Infill Packet MUST be completed for all New Residential Construction, single lots!

BP - RESIDENTIAL NEW INFORMATION

Who is the PERMIT HOLDER – the person responsible for, will supervise <i>and do the work</i> for this permit: (Reference the “Who Can Pull a Permit document)		
<input type="checkbox"/> Homeowner / Property Owner <ul style="list-style-type: none"> Tax Bill and/or Deed filed with County Required Completed Homeowner's Affidavit Form Required Stated Issued ID Required 	<input type="checkbox"/> Contractor (if To Be Determined please check <input type="checkbox"/>) <ul style="list-style-type: none"> Current Business License Required Copy of State Certification (if applicable) Required State Issued ID Required 	
<p style="color: red; font-weight: bold;">The signature below is a binding statement that the permit holder will be responsible for and supervise the job at the permitted address and that the Property Owner is aware of, agrees with and has granted permission for this permit to be applied for and issued.</p> <p>Signature of Permit Holder (or agent): _____ Date: _____</p>		
Who is submitting this application: <input type="checkbox"/> Property Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Designer / Engineer / Architect <input type="checkbox"/> Permit Expeditor <input type="checkbox"/> Agent for Permit Holder		
AGENT FOR PERMIT HOLDER: (All Contact Information Required! Authorized Agent Form required!)		
Name: _____		Phone: _____
Address (Physical / No PO Boxes): _____		
City: _____	State: _____	Zip: _____
Email: _____		
PROPERTY OWNER: (REQUIRED – APPLICATION WILL NOT BE ACCEPTED WITHOUT PROPERTY OWNER'S INFORMATION!)		
Name: _____		Phone: _____
Address (Physical / No PO Boxes): _____		
City: _____	State: _____	Zip: _____
Email: _____		
CONTRACTOR: (All Contact Information Required - if To Be Determined, please check <input type="checkbox"/>) If contractor is to be determined, an ‘ASSIGNING CONTRACTOR TO PERMIT AFTER SUBMISSION’ form must be submitted with updated information and signatures before permit can issued.)		
<input type="checkbox"/> State Certified Contractor	<input type="checkbox"/> Specialty Trade (Roofer, Concrete, Siding, Sheetrock, Fence, Windows, etc...)	
Name: _____	Phone: _____	
Company Name: _____	Phone (Company): _____	
Address (Physical / No PO Boxes): _____		
City: _____	State: _____	Zip: _____
Email: _____		
Business License #: _____	State Card # (if applicable): _____	
DESIGNER / ENGINEER / ARCHITECT / PERMIT EXPEDITER (If applicable):		
<input type="checkbox"/> Designer <input type="checkbox"/> Engineer <input type="checkbox"/> Architect <input type="checkbox"/> Permit Expediter		
Name: _____	Phone: _____	
Company Name: _____	Phone (Company): _____	
Address: _____		
City: _____	State: _____	Zip: _____
Email: _____		

Type of CERTIFICATE: At the completion of this project, I am requesting the following Certificate(s) TO BE issued.

(\$115.00 for each Certificate issued. Per Fee schedule, Certificate fees will be assessed per unit for multifamily and townhome dwellings.)

☐ **Certificate of Completion (CC - Residential and Commercial)**

For all renovations whereby the square footage and use has not changed! Can be issued when a Certificate of Occupancy is not required and can only be issued *After* the final inspection for specific permit has been approved.

☐ **Residential Certificate of Occupancy (CO)**

Required for: all new residential construction, additions/reductions where occupied square footage changes and any changes in zoning use (*i.e., as in from duplex to single family home, commercial to residential, etc....*) Can only be issued after Building Final inspection has been approved. (For multiunit permit, submit a spreadsheet of all unit addresses.

☐ **Commercial Certificate of Occupancy (CO) – This section must be completed by Property Owner!**

Required for: all new commercial construction, additions / reductions where occupied square footage changes, any change in use, after new shell builds, any tenant build outs, any change of ownership of commercial building or businesses. LANDLORDS of commercial buildings *and* business tenants must have their own CO and Business License.

This CO is for the: ☐ Landlord ☐ Tenant... ☐ Owner Occupied (Landlord and Tenant the same)

I, _____ (print name) , owner of the property:

(The Property Owner must select one of the three options and sign below)

1. ☐ **Owner Occupied:** WILL occupy and WILL operate the business at the permitted address.
2. ☐ **Owner as Landlord:** WILL NOT occupy the property, however, I have the intention to lease property to future and/or existing tenants.
3. ☐ **Owner Leasing to Tenant:** Agree to lease said property and/or suite to...

Tenant: _____ beginning as of date: _____.

Property Owner's Signature

Date

Notary's Signature

Date

(seal)

Business Name: _____

Address (No PO Boxes) : _____

City _____

State _____

Zip _____

Email : _____

Use, Services and Products Provided (*must be very specific, i.e – "Warehouse storing shipping logistic products, "Administration Tax Office for seeing clients only, etc..."*):

CERTIFICATE OF OCCUPANCY OR COMPLETION REQUEST

PLANNING & COMMUNITY DEVELOPMENT

eastpointcity.org

2757 East Point Street, East Point, GA 30344
Phone: (404) 270-7029 Fax: (404) 209-5148

RESIDENTIAL INFILL SURVEY CHECKLIST

ALL DOCUMENTS AND QUANTITIES ARE REQUIRED

Item #	Required Document	Number of Copies	Check <input type="checkbox"/>
1.	Neighborhood Comment Form	1 original	
2.	Survey Area Form	1 original	
3.	Proposed Design Specifications Form	1 original	
4.	Acknowledgement of Public Participation Form	1 original	
5.	Colored Pictures of all Thirteen (13) Surveyed Homes	1 original; no more than 2 pictures per page.	

REQUIRED ITEMS FOR RESIDENTIAL INFILL SURVEY AND PUBLIC PARTICIPATION PACKET:

Applications are available at the Department of Planning and Community Development or at www.eastpointcity.org. All application submittals must be done in person at 2757 East Point Street, East Point, GA 30344 between 8:00 a.m. and 3:00 p.m. Incomplete applications will not be accepted. Please refer to the information below for all documents needed for filing.

The applicant must meet with a City Planner to obtain “survey area” and “neighborhood association” information before submitting this packet.

- 1. NEIGHBORHOOD COMMENT FORM:** Read the instructions on the form and then reach out to the neighborhood association president. The applicant needs to provide all materials necessary (plans, architectural renderings, site plan, etc.) for the neighborhood president to review their proposal.
- 2. SURVEY AREA FORM:** Identify the scope of work and complete the appropriate columns as indicated. The survey area shall include thirteen (13) **single-family homes** consisting of: three (3) houses on each side, six (6) houses in the front and one (1) house in the rear. Total square footage data can be found by going to qPublic.net (Google Search: **Fulton County qPublic.net** or visit <https://qpublic.schneidercorp.com/Application.aspx?App=FultonCountyGA&Layer=Parcels&PageType=Search>). The bottom of this page needs to be notarized.
- 3. PROPOSED DESIGN SPECIFICATIONS FORM:** Fill out all fields and refer to the Zoning Regulations (https://library.municode.com/ga/east_point/codes/zoning) in Chapter 4, Article J, Section 10-4091(5) to see the allowable building standards for your project.
- 4. ACKNOWLEDGEMENT OF PUBLIC PARTICIPATION FORM:** This notarized document states that the applicant has done their due diligence in reaching out to the neighborhood association to gather public input thus fulfilling their public participation requirement.
- 5. COLORED PICTURES OF THE 13 SURVEYED HOMES:** Clear and visible colored photos need to be submitted so that the reviewer can see which homes the applicant has surveyed. The applicant may submit no more than two pictures per page. **Make sure and label each photo with the correct address.**



FOR OFFICE USE ONLY

Date: _____ Permit #: _____

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NEIGHBORHOOD COMMENT FORM

APPLICANT INSTRUCTIONS

First, fill out the **PROJECT DETAILS** and **APPLICANT** sections of this form. Then, contact the Neighborhood Association President and inform them that they need to circulate details of your proposed project around to the neighborhood and collect the neighbors' comments on this form. Finally, ask the president how they will like for you to deliver and pick-up this form (e.g., in-person, mail, e-mail, etc.).

PROJECT DETAILS

Address: _____

Project Description (Describe All Proposed Work): _____

APPLICANT

Name: _____ Phone: _____

Address: _____ E-mail: _____

City: _____ State: _____ Zip: _____ Fax: _____

NEIGHBORHOOD PRESIDENT INSTRUCTIONS

This form is intended to express the neighborhood association's level of support for the proposed project. The neighborhood president is tasked with gathering the applicant's project information and circulating it amongst members of the neighborhood. Write down as many comments from the neighbors as possible and attach additional sheets if necessary. This form is required for the applicant to apply for a building permit. Please make sure that you return this form back to the applicant in a timely manner. If you have any questions or concerns, call the Department of Planning and Community Development Planning Division at (404) 270-7029.

Neighborhood Association: _____ Ward: _____

Contact Name: _____ Signature: _____

Phone: _____ E-mail: _____

Meeting Type: ☐ Neighborhood Meeting ☐ Social Media ☐ Other: _____

Meeting Date: _____ Number of Attendees: _____ Did applicant present their project? ☐ Yes ☐ No

Comments: _____



FOR OFFICE USE ONLY

Date: _____ Permit #: _____

PLANNING & COMMUNITY DEVELOPMENT*eastpointcity.org*2757 East Point Street, East Point, GA 30344
Phone: (404) 270-7029 Fax: (404) 209-5148**SURVEY AREA FORM****PROJECT DETAILS**

Address: _____ Print Name: _____ Phone: _____

Scope of Work (Check One):

☐ Siding Only (Columns A and B only)☐ New Single-Family Home (Columns A through H)☐ Adding Square Footage (Columns A, B and C only)**SURVEY AREA**

A	B	C	D	E	F	G	H
Address	Exterior Material Type	Total Square Feet	Orientation of Home (Home Faces What Street?)	Foundation Type	Front Porch or Stoop? (Y/N)	Garage or Carport? (Y/N)	Fireplace or Chimney? (Y/N)
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
AVERAGE:							

NOTARIZATION

This notarized survey certifies that to the best of my knowledge, the information provided herein is true and accurate. I understand that failure to provide accurate information will result in the revocation of all permits related to this project.

Notary Signature: _____ Commission Expires: _____

(SEAL)

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PROPOSED DESIGN SPECIFICATIONS FORM**INSTRUCTIONS**

Provide us details of your proposed project. All fields are required. Incomplete forms will not be accepted.

PROJECT DETAILS

Address: _____

Print Name: _____ Phone: _____

PROPOSED DESIGN SPECIFICATIONS

Exterior Material Type: ☐ Brick ☐ Stone ☐ Stucco ☐ Siding ☐ Other

If **Siding**, What Type? _____

If **Other**, What Type? _____

Total Square Feet: _____

Orientation of Home (Home Faces What Street?): _____

Foundation Type: ☐ Slab ☐ Crawl ☐ Basement ☐ Partial

Front Porch: ☐ No ☐ Yes

Front Stoop: ☐ No ☐ Yes

Garage:
Size: ☐ None ☐ Attached ☐ Detached
☐ 1-car ☐ 2-car ☐ 3-car

Carport:
Size: ☐ None ☐ Attached ☐ Detached
☐ 1-car ☐ 2-car ☐ 3-car

Fireplace ☐ None ☐ Internal ☐ External

Chimney ☐ None ☐ Internal ☐ External



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APPLICANT ACKNOWLEDGEMENT FOR PUBLIC PARTICIPATION

ACKNOWLEDGEMENT

I/we acknowledge that I/we have received and understand the public participation requirements for meeting with interested citizens to advise residents of pending zoning, variance, special use permit, residential infill or subdivision of property applications and to allow citizens the opportunity to discuss concerns and provide input about project design or development.

Moreover, I/we attest that all information provided herein is true and correct to the best of my knowledge and belief.

APPLICANT SIGNATURE

If more than one applicant:

PRINT NAME

PRINT NAME

SIGNATURE

SIGNATURE

DATE

DATE

NOTARIZATION

NOTARY PUBLIC SIGNATURE

COMMISSION EXPIRES

(SEAL)

DATE