Cobb County Commercial Permit Application Form

All applicable items must be completed before submittal to the Fire Marshal's Office. See page 2 for minimum plan requirements.

INCORRECT, INVALID, OR INCOMPLETE INFORMATION MAY RESULT IN A STOP WORK ORDER AND ADDITIONAL FINES

New Bldg. Add (Int. / New	New Tenant □	Remodel	Apartment.	Condo 🗖
Fire Damage (R/C) Other				
Arch/Designer		Phone		
Person Responsible for Plans		E-mail		Phone
Job / Tenant Name				
Parcel ID#				
Project Address			Building#	Suite
City	City Limits Acworth	☐ Kennesaw	☐ Powder Springs	Zip
Complex Name				
Property Owner's Name			Phone	
Address	City	State _	Zip	
General Contractor			Phone	
Address	City		_ StateZip _	
24 Hour Contact Person	E-mail _		Phon	e
Stories in Building Num	ber of Buildings	Basement Basement	Yes □ No S	eptic 🗆 Sewer 🗅
Construction Cost \$	Occupancy Type	per NFPA 101_	O/Loa	d per NFPA 101
New Bldg. Sq. Ft Ne	ew Tenant Sq. Ft	Addition Sq.	Ft Rem	odel Sq. Ft.
Construction Type per Building Co Space Completely Sprinkled: Building Completely Sprinkled: Sprinkled: Building Completely Sprinkled: Building Completel	Yes □ No Type Ro	eq. by Code 🗖 Y	Yes No(List c	ode section)
Supervised System ☐ Yes ☐ No R	Req. by Code Section	(List code se		
Other fire protection system(s) Please check if building/job will h			L	SC Year
Electrical	Plumbing \square Yes \square	l No	Heating/Air 🗖 Y	Yes □ No
Fire Sprinklers □ Yes □ No	Hood System \square Y	es 🗖 No	Fire Alarm 🖵 Ye	es 🗆 No
Signature			Dat	e
Title/Relation				
**** Offic	cial Use Only - DO NO	Γ WRITE BEI	OW THIS LINE	****
Building Department Comments Reviewed By:			D	
Fire Comments Reviewed By:				ate
	FMO Bldg.			
Certificate of Occupancy Required Letter of Completion Required	d	nstruction Only,	O.C.G.A. 25-2-13:	☐ Yes ☐ No
Special Inspections Required			PERMIT #	

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Cobb County Water System (CCWS) (770) 419-6327 and Health Department Requirements

	Cobb County Water System	m (CC WS) (77	0) 419-0327 and Health Department Requirements	
der ma CO	termine if plan approval and water and se ake a final determination. CCWS will man CWS to process. If required, plans must be	wer fees are requink the requirement eapproved and fe	PlanReview@cobbcounty.org or 770-419-6335 (fax) so that Cored for the project. CCWS may request additional information its on line A below and return the application. Allow five busing the must be paid prior to submitting plans for structural plan reversign No. Signed:	in order to less days for view.
B. Pla	ns Approved On Fee	s Paid On	Signed: Date	e:
			eptic systems, public swimming pools, restaurants/cafeterias, c Go to www.CobbAndDouglasPublicHealth.com for more infor	
3.	Fire	Marshal's Offic	ce Requirements	
		•	0) 528-8310 for plan review appointment	
The R			ire Marshal Plan Review Appointment:	
	1. Minimum of (4) sets of plans when Minimum Required Information	Pass / Fail	Minimum Doguinad Information	Pass / Fail
	ame & Project Address on the plans		Minimum Required Information Show a top view of the tenant location inside the building	
Overa	Il area of the space shown – It must be scaled dimensions of each room	or	Show all door, window and wall locations & Furniture Layout, merchandise, shelving/fixtures for the tenant space	
	fy and label each room on the drawings		Show all exit sign, emergency light & fire extinguisher locations	
	lan (Show the proximity of the space in action with building and/or property)		Scope of work letter (Explain the construction, if any, being done with your permit)	
Comp	lete egress route to outside the building (Show access two exits)	,	Cash or Check to pay for the plan review, make checks payable to: Cobb County Fire and Emergency Services	
In addi	 \$125.00 Plan review fee is required for review. Minor renovation are reviewed ove Any plans stating "Not Released for Zoning approval may be required (attion to the above requirements, the following the following station). 	submittal for strudent structure as the counter as the counter as the construction of the construction of the counter as the construction of the counter as	or similar are not acceptable. nandatory before issuance of a Permit for a free standing	
	Land Disturbance Permit issued by Site Address Verification issued by Cobb Conding Permit (On site Erosion Control Architectural Design Worksheet complex Required: Actual Statement and Schedule of Special Insp. Health Department Approval. (770-433) One Complete Set of Plans on CD in Plans.	Plan Review. (77 punty GIS. (770-5 pl Approval) Site in the letted. It: ections. (See www 5-7815) DF Format	Inspections. (770-528-2142) Grading #:	
	Erosion Control Certification (See gasw	vcc.georgia.gov) #	# :	
	State Contractor License: Type		#	
5. Comn	nents		artment Use Only	
Appro	oved by:		Date:	

Commercial Permit Application.docx

Revised 10/7/16