

# TURNER COUNTY BUILDING PERMIT APPLICATION

<b>APPLICANT</b> Permit #: _____ (County Use Only) Name: _____ Phone: (H) _____ (W) _____ Address: _____ City: _____ State/ZIP: _____ Name of Property Owner (if different): _____ Name of Contractor: _____ Name of Septic System Installer (if applicable): _____	Comments by reviewer: _____ _____ _____
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<b>DEVELOPMENT SITE/LOCATION</b> Site Address: _____ Legal Description: _____	Comments by reviewer: _____ _____ _____
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<b>TYPE OF APPLICATION</b> (check all that apply) <input type="checkbox"/> Building Permit (new structure) <input type="checkbox"/> Moving Permit <input type="checkbox"/> Building Permit (remodeling) <input type="checkbox"/> Appeals Form <input type="checkbox"/> Building Permit (accessory building) <input type="checkbox"/> Demolition Permit <input type="checkbox"/> other: _____	Comments by reviewer: _____ _____ _____
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<b>ADDENDUM NEEDED FOR THE FOLLOWING</b> (check all that apply) <input type="checkbox"/> Conditional Use Permit (Concentrated Animal Feeding Operations) <input type="checkbox"/> Conditional Use Permit (the proposed use must be listed as a Conditional Use in the particular zoning district) <input type="checkbox"/> Variance (relates to yard requirements, lot requirements, off-street parking requirements, etc.) <input type="checkbox"/> Zoning Amendment (to change zoning district boundaries or zoning designation of a particular parcel of land)	Comments by reviewer: _____ _____ _____
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<b>PLEASE DESCRIBE THE PROPOSED WORK:</b> (be specific as to size of buildings, lots, construction materials, etc.) (attach additional sheets as necessary) <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	Comments by reviewer: _____ _____ _____
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<b>Value of the construction or improvement:</b> \$ <span style="border: 1px solid black; padding: 2px 20px;"></span> (see "BUILDING PERMIT FEES" at the top of the reverse side of this form for more information)	Comments by reviewer: _____ _____ _____
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<b>PLEASE DESCRIBE THE PROPOSED USE WHEN COMPLETED:</b> <hr/> <hr/> <hr/> <hr/> <hr/>	Comments by reviewer: _____ _____ _____
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**REMEMBER TO ATTACH A SITE PLAN / MAP SHOWING THE PROPOSED WORK \* (see site plan explanation attachment)**

<b>SIGNATURE OF APPLICANT</b> _____ Signature of Applicant	I, the undersigned, agree to comply with all provisions of the Zoning Regulations and County Ordinances of Turner County, and to comply with any approved plans and specifications accompanying this application. _____ Date
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<input type="checkbox"/> Permit Approved <input type="checkbox"/> Permit NOT Approved. Reason: _____ _____ Signature of Authorizing Official	_____ Title _____ Date
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