



**BUILDING DEPARTMENT**  
 12453 Hwy 92 Ste 105  
 Woodstock, GA 30188  
 Phone: 770-592-6036  
 www.woodstockga.gov  
 woodstockbuilding@woodstockga.gov

**RESIDENTIAL  
 PLAN SUBMITTAL  
 CHECKLIST**

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

**ALL RESIDENTIAL BUILDING PERMIT APPLICATIONS MUST HAVE THE FOLLOWING  
 SUPPORTING DOCUMENTATION FOR PLAN REVIEW**

**\*TWO SETS OF PLANS AND HOUSE LOCATION PLANS ARE REQUIRED FOR REVIEW\*** \_\_\_\_\_

**\*\*THREE SETS FOR A SINGLE FAMILY ATTACHED HOME OR IF THE HOME IS LOCATED  
 IN DOWNTOWN DISTRICT\*\*** \_\_\_\_\_

PLEASE ENSURE THE FOLLOWING INFORMATION IS INCLUDED IN YOUR PLANS

**PLAN REVIEW:**

**INITIAL BELOW**

- 1. COVER SHEET:
  - a. CURRENT CODES WITH G.A. AMENDMENTS \_\_\_\_\_
  - b. WIND LOAD – 90 MPH \_\_\_\_\_
  - c. SEISMIC CATEGORY – B \_\_\_\_\_
  - d. LIVE LOADS / DEAD LOADS \_\_\_\_\_
- 2. FLOOR PLANS – LAYOUTS – 1<sup>ST</sup>, 2<sup>ND</sup>, 3<sup>RD</sup>, BASEMENT \_\_\_\_\_
- 3. ELECTRICAL PLANS – 1<sup>ST</sup>, 2<sup>ND</sup>, 3<sup>RD</sup>, BASEMENT \_\_\_\_\_
- 4. ELEVATIONS – FRONT, REAR, SIDES \_\_\_\_\_
- 5. STRUCTURAL PLANS – FOUNDATIONS / FRAMING DETAILS / UL DETAILS IF APPLICABLE \_\_\_\_\_
- 6. TABULATION CHART–SQ. FOOTAGE FOR EACH LEVEL \_\_\_\_\_
  - a. (INCLUDE ALL DECKS/COVERED PORCHES) \_\_\_\_\_

**H.L.P. REVIEW:**

- 1. ALL SETBACKS – FRONT, REAR, SIDES – AS PER APPROVED PLAT \_\_\_\_\_
- 2. HOUSE PLACEMENT \_\_\_\_\_
- 3. DRAINAGE OFF LOT (SHOW ARROWS HOW WATER FLOWS AWAY FROM THE HOUSE) \_\_\_\_\_
- 4. PLAT BOOK AND PAGE NUMBER \_\_\_\_\_
- 5. SIGNED AND SEALED FROM A REGISTERED LAND SURVEYOR \_\_\_\_\_
- 6. TREES PER APPROVED TREE PLAN (NEW COMMUNITY) \_\_\_\_\_

**IF ANY ABOVE ITEM IS MARKED “N/A”, AN EXPLANATION MUST BE INCLUDED** \_\_\_\_\_



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**BUILDING  
 PERMIT  
 APPLICATION**

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

**PLEASE TYPE OR PRINT**

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

**PROJECT INFORMATION:**

Project Name: \_\_\_\_\_ Subdivision/Business Name: \_\_\_\_\_ Lot/Suite #: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTY: CHEROKEE

- RESIDENTIAL       COMMERCIAL
- NEW       ALTERATION       ADDITION       ACCESSORY STRUCTURE       REPAIR
- IF **NEW** SINGLE FAMILY HOME:     DETACHED       ATTACHED

**OWNER INFORMATION:**

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ Email: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_

**CONTRACTOR INFORMATION:**

COMPANY NAME: \_\_\_\_\_  
 CONTACT NAME: \_\_\_\_\_ LICENSEE NAME: \_\_\_\_\_ STATE LICENSE NO.: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_ ALT. PHONE: \_\_\_\_\_  
 ALTERNATE CONTACT: NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**ARCHITECT/ENGINEER:**

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

**SUBCONTRACTOR INFORMATION (AFFIDAVITS FOR NEW SINGLE FAMILY HOMES ONLY):**

ELECTRICAL CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 PLUMBING CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 MECHANICAL CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 GAS CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 LOW VOLTAGE CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

**DESCRIPTION OF WORK:** \_\_\_\_\_

OCCUPANCY TYPE: \_\_\_\_\_ CONSTRUCTION TYPE: \_\_\_\_\_ SQ. FEET: \_\_\_\_\_ CONSTRUCTION VALUE:\$ \_\_\_\_\_

