



Chatham County Department of Building
Safety & Regulatory Services
P.O. Box 8161, Savannah, GA 31412-8161
912-201-4300 - Fax 912-201-4301



DOCK / BULKHEAD PERMIT APPLICATION

The following information must be submitted before a permit can be issued.

1. Copy of the permit issued by Department of Natural Resources (DNR)
2. Subcontractor list with signatures / Homeowner Affidavit
3. Environmental Health approval is lot has a septic tank
4. Copy of current State and local business license for builder and all subcontractors
5. Two copies of a site plan (not larger than 11 ½ by 17)
6. Two sets of construction drawings
7. **Bulkheads** – If below the base flood elevation, must have approval from Engineering

P.I.N.: _____ *Obtained from Tax Assessors Office (912) 652-7271*

Project Address: _____

☐ Residential ☐ Commercial

Owner:

Name: _____ Phone No. (____) _____ - _____

Address: _____

City: _____ State: _____ Zip: _____

Person applying for permit:

Name: _____ Phone No. (____) _____ - _____

Company: _____

Address: _____

Dock / Bulkhead Detail:

Will dock be wired for electricity? ☐ Yes ☐ No
Will dock be plumbed for water? ☐ Yes ☐ No
Septic tank on lot? ☐ Yes ☐ No

Contractor:

Name: _____

Company: _____

Address: _____

Email: _____

Phone No. (____) _____ - _____ Fax No. (____) _____ - _____

Local License # _____ State License # _____

***All commercial docks require licensed contractor to do work.**

***For residential, if homeowner is doing the work, complete *HOMEOWNER AFFIDAVIT* form.**

Cost

Dock \$ _____ Plumbing \$ _____ Electrical \$ _____

Total Cost \$ _____

This facility is situated on _____ (waterway) and has been
permitted by the Georgia Department of Natural Resources under permit number _____
dated ____/____/20____.

It is understood and agreed by the undersigned owner or agent that the approval of this application does not constitute a privilege to violate the building codes, zoning ordinance, or other ordinances of Chatham County and that any omission of or misrepresentation of fact with or without intention of the undersigned or any alteration from this application (including changing subcontractors) without the approval of the Building Official shall constitute sufficient ground for the revocation of any permit issued which was based on the approval of this application. The owner is listed above will be held responsible for insuring that all permits have been obtained and that all required inspections have been made. The owner will be held legally liable for any violations which may occur with or without his or her knowledge. The owner may request a Certificate of Occupancy or Certificate of Completion when all required inspections have been approved.

Owner/Agent _____

Date _____



Chatham County Building Safety & Regulatory Services

COMPLETE APPLICATION CHECKLIST AFFIDAVIT

All required approvals must be received when submitting the permit application. If any forms or approvals are missing, all paperwork will be returned to applicant.

Address: Permit #

Required Forms & Documents

Y N N/A

- Signed Application
- Complete Application Checklist Affidavit (this form)
- Site Plan – Two copies (11-1/2 by 17)
- Subcontractor Signature Page
- Homeowner Affidavit
- Copy of Georgia State license and copy of local Georgia business license
- Construction Plans / Drawings – Two copies

All Required Additional Approvals

Y N N/A

- Department of Natural Resources (New construction or repair of docks)
- Environmental Health if a septic tank is on the lot

Note: Supplemental information may be required during plan review to address deficiencies.

Pursuant to the requirements established by Georgia Law Section §8-2-26, I am submitting all documents checked “Y” above for review and approval.

Signature Printed Name

Date

Office Use Only

Complete Not Complete Name: Date



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Gregori S. Anderson, CBO
Director

Clifford Bascombe, CBO, CFM
Assistant Director

CHATHAM COUNTY SUBCONTRACTOR LIST

Job Location _____

General Contractor _____

PLUMBING

Date _____

I hereby certify that I will perform the plumbing work for the project described above and I further certify that I have a valid Georgia State license and local business license.

Local Business License # _____ Jurisdiction _____

State License # _____ Expires: _____

Company Name _____

Signature _____ Phone No. (____) ____ - _____

Email _____

ELECTRICAL

Date _____

I hereby certify that I will perform the plumbing work for the project described above and I further certify that I have a valid Georgia State license and local business license

Local Business License # _____ Jurisdiction _____

State License # _____ Expires: _____

Company Name _____

Signature _____ Phone No. (____) ____ - _____

Email _____



Gregori S. Anderson, CBO
Director

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Clifford Bascombe, CBO, CFM
Assistant Director

All Developers, Consultants, Contractors, and Property Owners

Fees

A non-refundable plan review fee of \$2.00 per thousand dollars of the construction value shall be collected at the time of application. The plan review fee is deducted from the permit fee so there is no increase in the total expense of the permit. Residential permit fees are assessed at \$6.00 per thousand dollars of construction value. Commercial permit fees are assessed at \$7.00 per thousand dollars of construction value.

Permit Posting

The permit holder or agent shall post the permit on a piece of plywood attached to a two by member, at least three feet above grade and visible from the right-of-way. The permit must be protected and the readability maintained throughout the duration of the project. The permit must be posted from commencement of the work until the Final Inspections have been completed and passed. Failure to post and maintain the permit will result in the schedule inspection being automatically failed and a \$30.00 re-inspected fee assessed at that time. A re-inspection request would be required for the next available day, after the fee is paid. This action is taken in compliance with the Administrative Section of the International Code and State Residential Construction Code.