



# City of Acworth Development Department

4415 Center Street  
Acworth, Georgia 30101  
Office: (770) 974-2032

[building@acworth-ga.gov](mailto:building@acworth-ga.gov)  
[www.acworth-ga.gov](http://www.acworth-ga.gov)

## RESIDENTIAL ADDITION PERMIT APPLICATION

***All/contractors are required to have a Georgia Contractor's License and a business license from a Georgia municipality!***

\*Note: A separate permit is required for each and every building or structure on which work is to be done. If building contains more than (1) dwelling unit, list the addresses or all units in which work will be done.

Expiration of Permits: All permits expire 6 months after the last required inspection that has been passed, or 6 months after the date of issue if no required inspections have been approved. The Building Official may issue a 6-month extension if there is any permit, (for due cause), if requested in writing by the permit holder prior to such a permit expiring.

Work Commencing Without a Permit: Where any work for which a permit is required is started without such a permit having been issued, the applicable fees shall be doubled. (This includes permits for Building, Electrical, Plumbing, Mechanical, Gas Etc.) The payment of such a double fee shall not relieve any persons from fully complying with the requirements if all applicable codes and City Ordinances including work already performed, concealed or otherwise not inspected, nor shall it relieve them from any other penalties as may be prescribed by law.

Re-inspection Fees: Trade Inspections - \$ 75.00 for each occurrence. Envelope Tightness Verification - \$ 200.00 each

Other Permits Required: Electrical, Plumbing and Mechanical work must be permitted separately.

### THE FOLLOWING ITEMS MUST BE ATTACHED TO THE APPLICATION BEFORE ZONING AND THE BUILDING DEPARTMENT WILL REVIEW / APPROVE YOUR PERMIT.

1. A Site Plan depicting the existing structure as well as the addition, along with the distances to all property lines
2. Front Elevation (as viewed from the street)
3. Foundation plan \*
4. Floor Plan for Each Floor \*
5. Typical Exterior Wall Details for Above Ground & Below Ground Walls \*
6. Landscaping Plan. Note that all disturbed areas of ground cover must be re-vegetated with sod or plantings.
7. Land Disturbance permit from Public Works & Soil & Erosion Control Plan (770)974-5233
8. Proof of Connection to Public Sewer. (if on septic system, other documents will be required).

\* Please refer to the attached handout for the minimum details required for a plans review.

Location / Street Address: \_\_\_\_\_

Subdivision / Complex: \_\_\_\_\_ Lot / Apt. #: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Mobile: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Mobile: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Job Description: \_\_\_\_\_

TOTAL SQUARE FOOTAGE to be ADDED: \_\_\_\_\_ \*\*COST OF CONSTRUCTION / VALUATION: \$ \_\_\_\_\_

\*\* The Total Cost of Construction (permit valuation) shall include the total cost of the building, electrical, gas, mechanical, plumbing, necessary equipment, and other systems, as required to erect and complete the addition, including design fees, connection to utilities, site work necessary for the foundation installation, the cost of materials, labor, overhead and profit. It is the "Turnkey" cost of the entire job.

BASE FEE:	\$ 80.00
PLAN REVIEW FEE:	\$ 150.00

#### FEES BASED ON VALUATION:

A. \$1-\$25,000 :	\$
B. \$25,001-\$50,000 :	\$
C. \$50,001-\$75,000 :	\$
D. \$75,001 AND OVER	(COST PER \$1,000) \$6.00 \$

TOTAL COST : \_\_\_\_\_ \$ \_\_\_\_\_

**This Permit is Subject to the Following Terms & Conditions**

**Lead & Asbestos Abatement:** State law requires proper licensure for contractors abating Lead or Asbestos containing materials in whole or in part, including the proper disposal thereof, and the proper precautions safeguarding employees and others from exposure.

**I hereby certify that I have read and examined this document and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. Granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.**

DATE

PRINT NAME-CONTRACTOR OR AUTHORIZED AGENT SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT

**OFFICE USE ONLY BELOW THIS LINE**

BASE APPLICATION ACCEPTED BY:

PLANS CHECKED BY:

STORMWATER & EROSION CONTROL APPPROVED:

ZONING APPROVAL:

TAX PARCEL NUMBER:

CONNECTION TO SEWEROWTVENDED SEPTIC via ENVIRONMENTAL

HEALTH: APPROVED FOR ISSUANCE BY:

Live Load: 30 /40 lbs. per sq. ft. Construction Type: Occupancy Type: Per 2018 IRC.

**Community Development Dept.**

**Building Inspections**

Building Official:

Permit Technician:  
Mary Ellen Lamb



Inspector / Plan Examiner:  
David Damon

Inspector / Plan Examiner:  
Harold Thomas

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*"The Lake City"*

**Minimum Items Detailed on \*Residential Plans for Building Dept. Review**

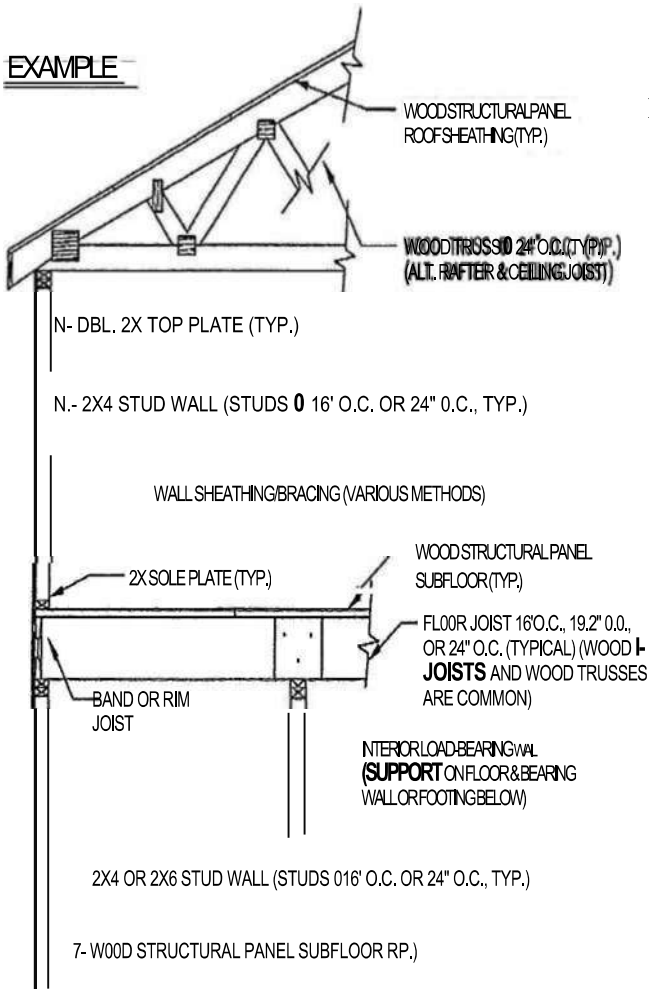
- (1) Site plans including all setbacks and locations of driveway from street to garage.
- (2) Provide floor plan including layout of all rooms, cabinets, fixtures, and size of bedroom egress windows.
- (3) Submit home elevations of front, rear and sides.
- (4) +Submit typical foundation details.
- (5) +Submit typical wall framing details (including roof & ceiling joists at exterior walls)
- (6) Full portal framing details for single story and two story structures, with or without basement.
- (7) Detail any cantilever projections & their supported load, if applicable (i.e. roof load only, one floor plus roof, etc.)
- (8) Provide deck and porch attachments detail to the structure, if applicable.
- (9) Identify location of electrical service & submit details of service grounding.
- (0) Identify location of electrical panel(s).
- (0) Identify location of sewer service lateral.
- (1) Identify location of water service lateral.
- (1) Identify location of A/C compressor(s) and furnace unit(s).

**\*Plans to be 18" X 24" minimum for plans review**

**+See Attached Handout Examples**

Revised 7-1-2025

EXAMPLE



Please provide the following information.

ROOF:

\_\_\_\_\_ Truss or  
\_\_\_\_\_ Stick built  
**Grade, size and species  
lumber** (with maximum span used)

Rafters

Ceiling joist

FLOORS:

\_\_\_\_\_ # **Stories**  
**Grade, size and species** (w/max. span used)

Studs

Floor joist

Headers / Girders / Beams

Sub-flooring

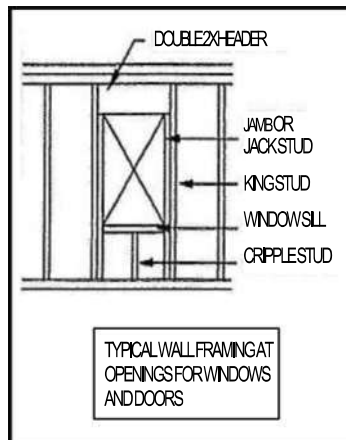
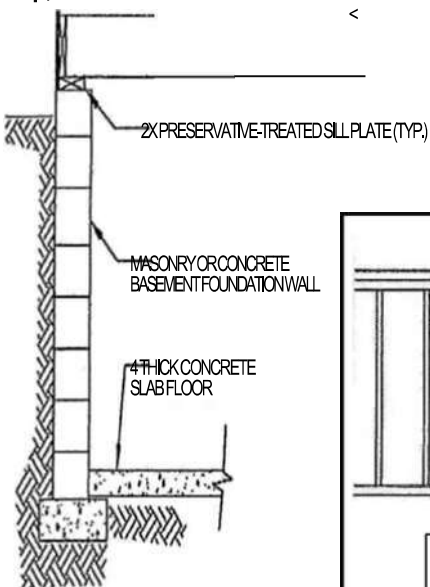
WOOD WALLS: **Sheathing**

Girders / Headers

Sill plates

Joist bridging

Pouring a masonry wall(s):



### Foundation

- \_\_\_\_\_ Monolithic slab
- \_\_\_\_\_ Slab on grade
- \_\_\_\_\_ Continuous footing & piers

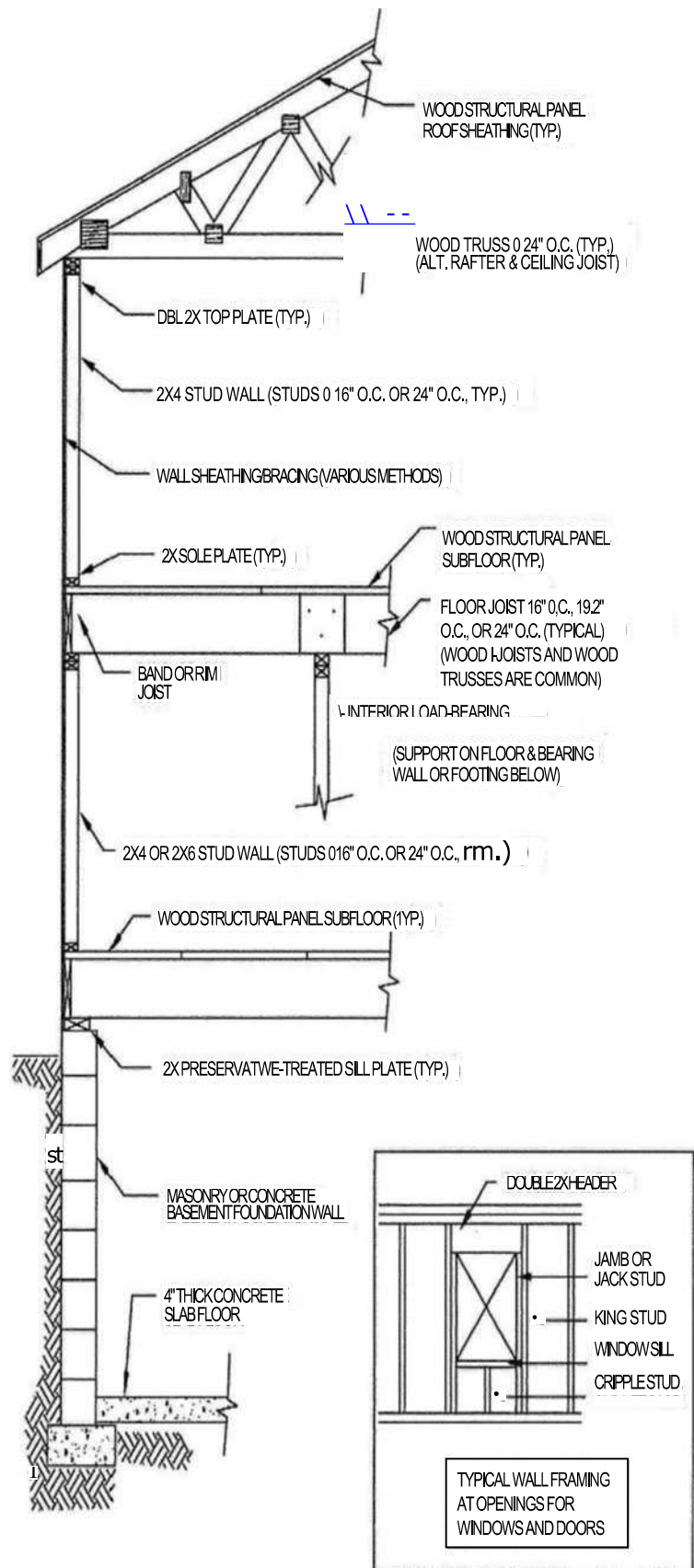
### Foundation wall

- \_\_\_\_\_ in. Concrete block in.
- \_\_\_\_\_ Reinforced concrete

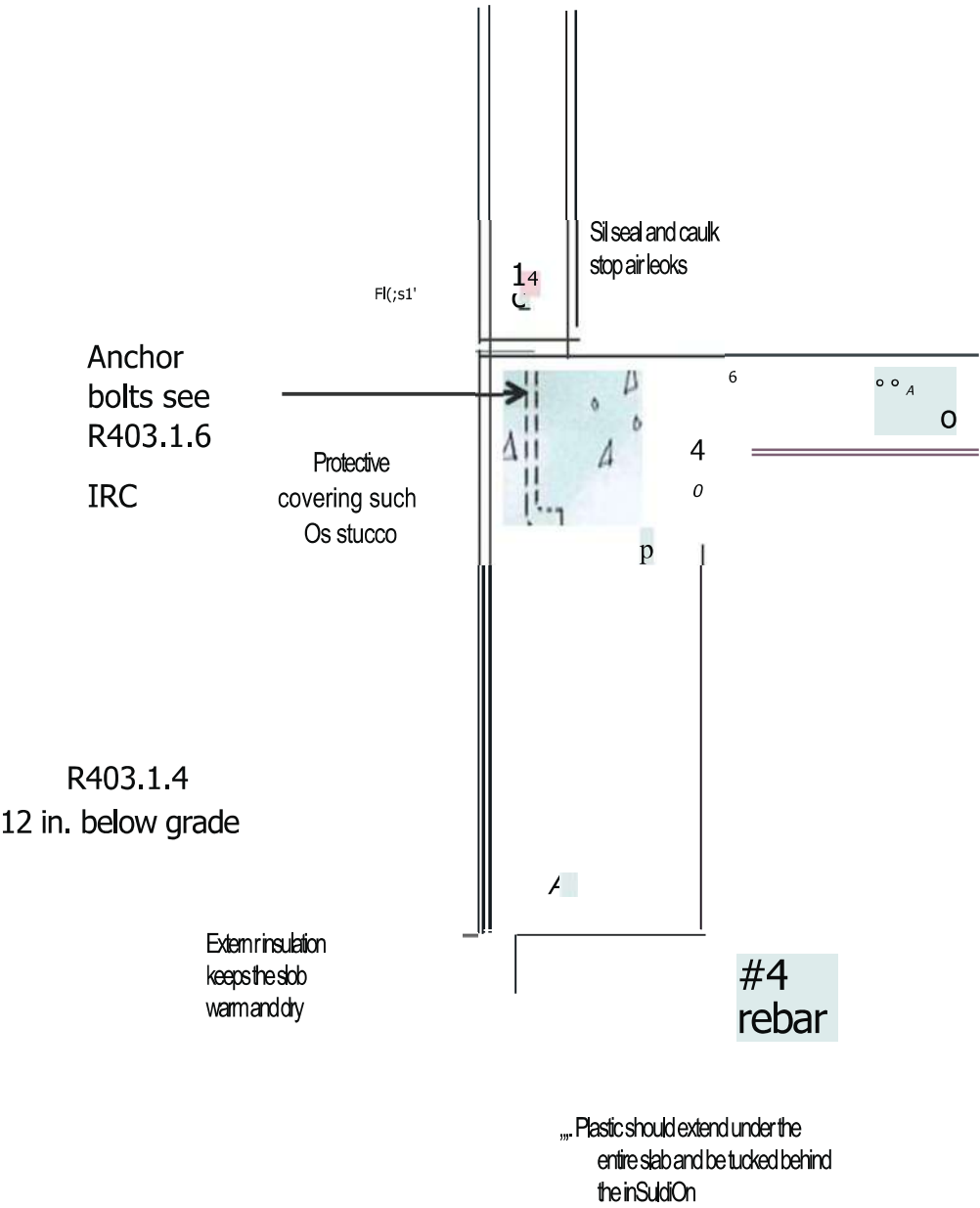
\_\_\_\_\_ per size

### Basement

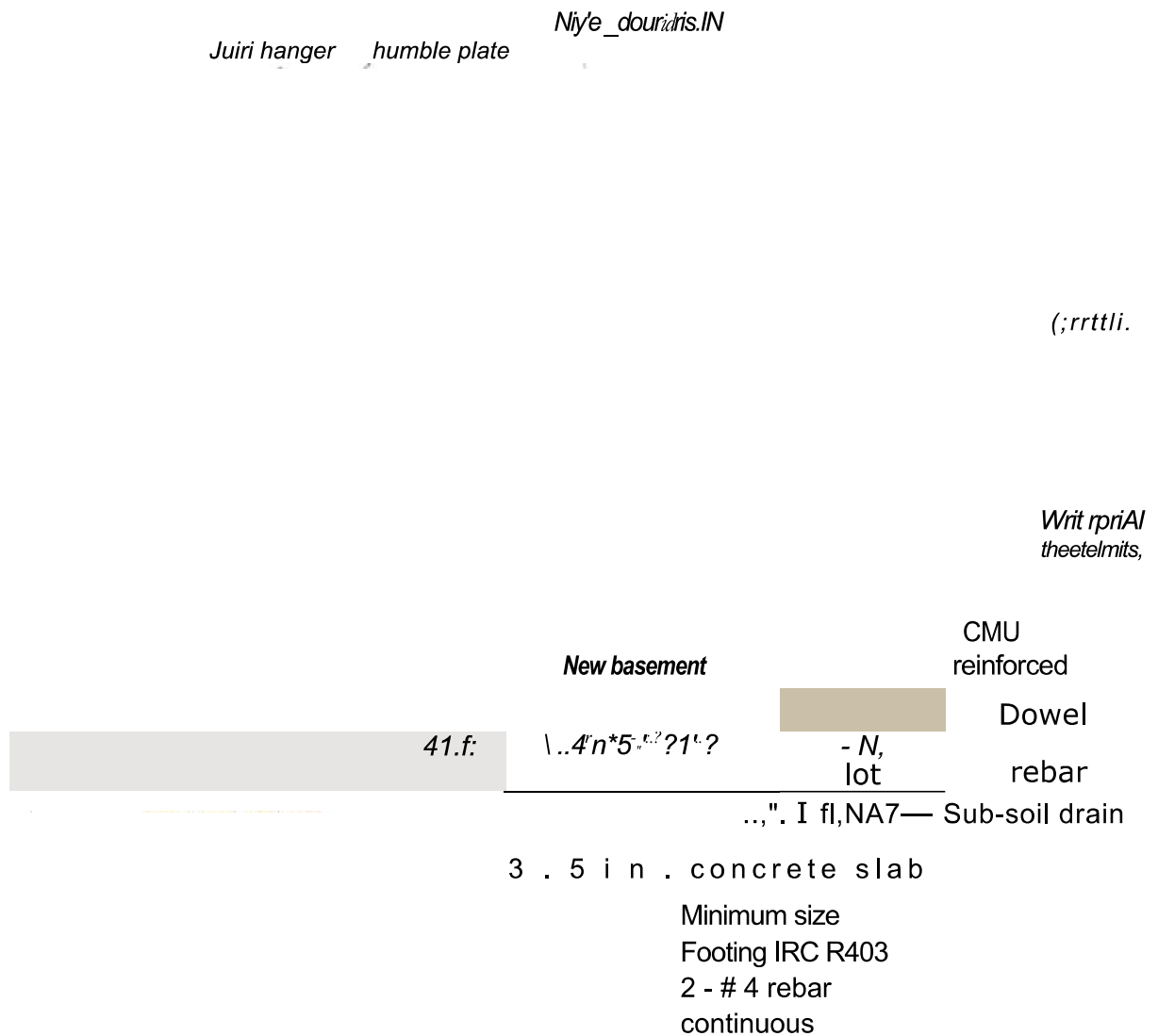
- \_\_\_\_\_ in. Concrete block
- \_\_\_\_\_ in. Reinforced concrete wall
- \_\_\_\_\_ ft. basement wall height in.
- \_\_\_\_\_ thick concrete floor



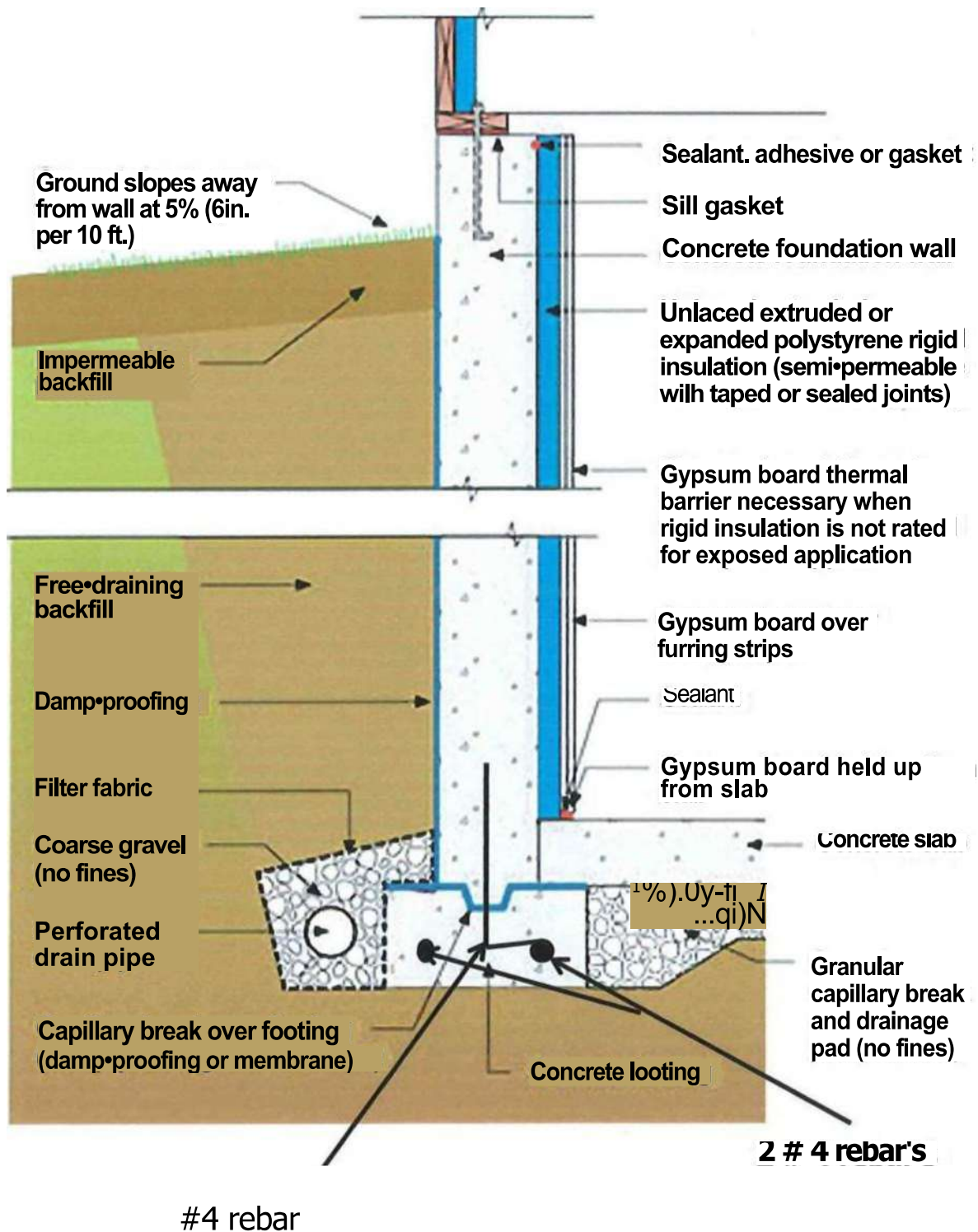
# Monolithic Slab



## Example of concrete block basement wall

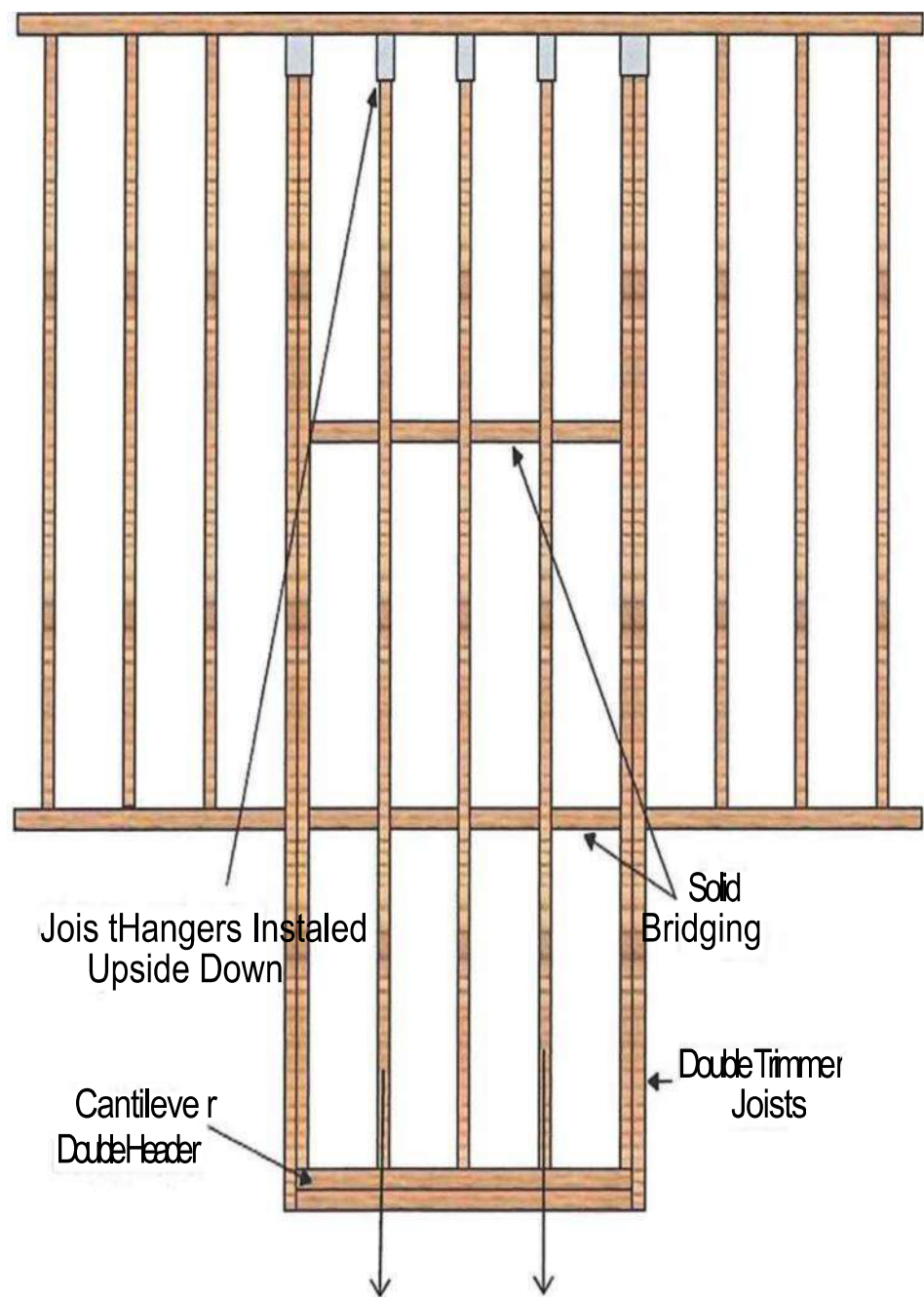


## Example poured concrete basement wall





Cantilever Framing Parallel Joist



Joist Hangers Installed  
Upside Down

Solid  
Bridging

Double Trimmer  
Joists

Cantilever  
Double Header

Size Joist from Table  
502.3.3(1) for Bearing  
wall and roof

Size joist from  
Table 502.3.3(2)  
for balcony

# Cantilever Framing Joist Perpendicular to floor joist

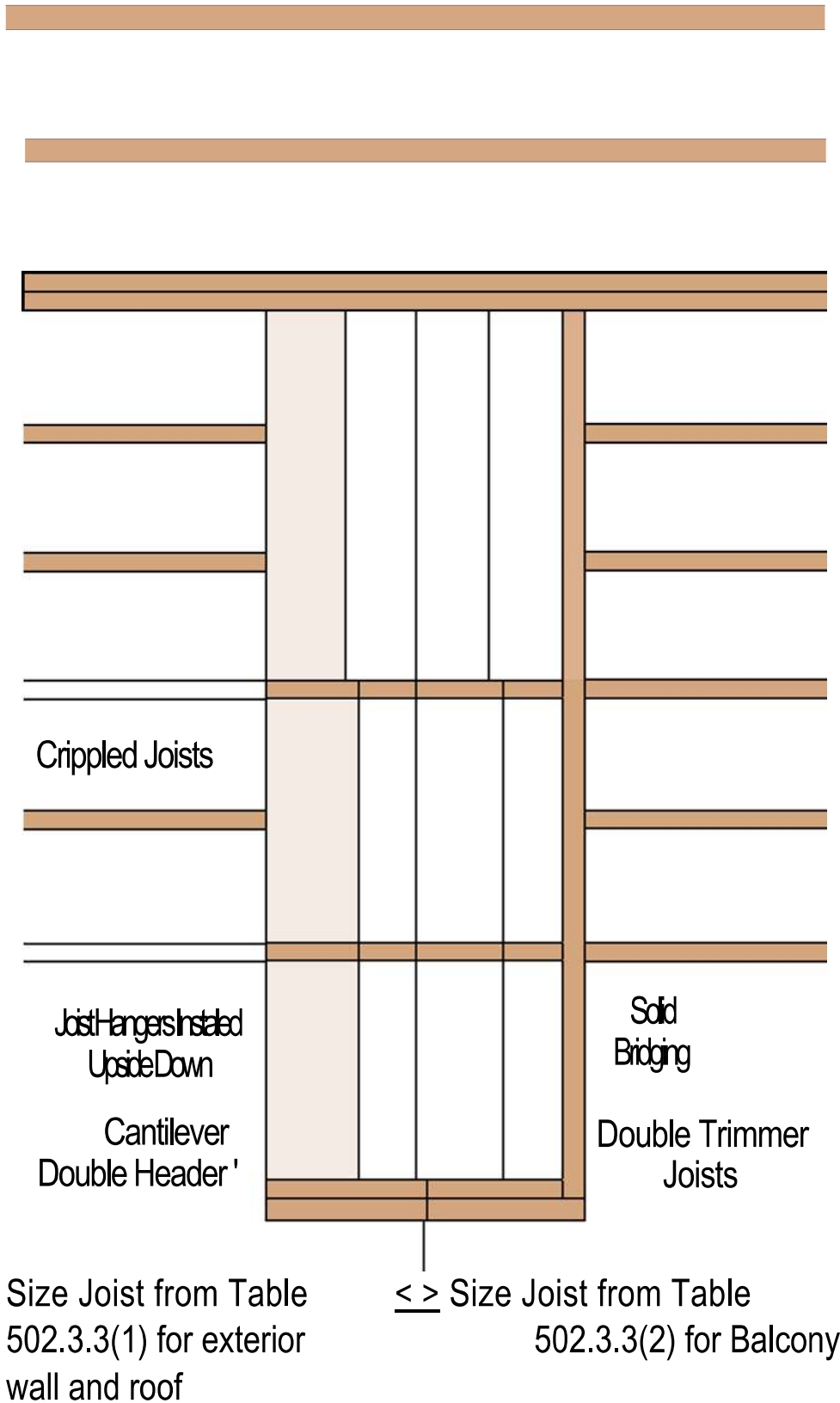


TABLE R502.3(1)  
CAMBER SPANS FOR FLOOR JOISTS S00001010 L1GHT-FRAME EXTBM BEARING WALL AND ROOF ONLY\*\*\*  
Moisture Load ≤ 40 psf, Roof Load ≤ 20 psf

Rafter 3 Spacing	Main/ a Cardinatipat kilt Forte ti Bootspra 9.gposin1bat'											
	&taxi Snow Load											
	≤ 23 psi			33 pd			50 pd			10 psf		
	Rod 116335			ftoofirdift			llooInli			Pool Yfidth		
	24ft	32ft	40ft	24ft	32ft	Of	24ft	32ft	40ft	24ft	32ft	loft
2x8@1' 2	20' OM (227)	15' (227)	18' (207)									
2 x10@16'	24' (28)	21' (297)	16' (364)	26' MO	18' OA		20' (375)					
2x10@ 1r	36' 0661	26' (219)	24' (270)	34' (198)	22' (263)	16' (324)	26' (277)			19' (356)		
2x 12 @ 16°		32' (287)	25' (355)	36' (163)	29' (345)	21' (428)	29' (367)	20' (484)		23' (471)		
2x12@12		42' OM (263)	31' (263)		37' (253)	21' (317)	36' (271)	27' (358)	17' (447)	31' (348)	1r (462)	
2x12@8"		48' (136)	45' (169)		48' OR (206)	38' (206)	40' (233)	26' (291)	36' (30)	29' (304)	18' (379)	

Far% 1 inch= 2.54 path l foa=304.8 on, pa Rom foot. QOM th

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TABLE M.34)  
CABBLEVER SPANS FOR FLOOR JOISTS SM1114 WE B1013 BALCONY<sup>0</sup>

Yer5er4x		Beam f:sedrat Scan (Uplit Face it Baelspsn Support ii .61 <sup>11</sup>		
		Omni Sono Load		
		< 30 pd	Swint	16 rot
2x8		42'(039)	39'(156)	34'(165)
2x8	IS	36'(151)	34''(171)	29''(180)
2x10	12'	61'(164)	57''(189)	49'(201)
2110	16'	53'(180)''	49'	42'(220)
2x10	24'	43'(212)	40'(241)	34'(255)
2x12	16'	72'(228)	67'(260)	57'(268)
2x 12	24'	58'(219)	54'(319)	47'(330)

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**If cantilever does not fit in table  
parameters It must be designed**

**and stamped by Georgia  
registered Engineer**