

APPLICATION FOR
TOWNHOUSE
BUILDING PERMIT

Permit #: _____
Receipt #: _____

Date: _____

PERMITTEE FIRST NAME: _____ LAST NAME: _____

Sprinklers are required if: (a) 4 or more units, (b) 3 units with 5,000 or more total square feet or (c) 3 units with less than 5,000 total square feet and three or fewer stories if not separated by 2 hour firewall.

1. DESCRIPTION OF THE WORK TO BE PERFORMED

- New Construction Townhouse Heated Sq. Ft. of work to be performed: _____
 Addition of 30 Sq. Ft. or more in interior space Unheated Sq. Ft. of work to be performed: _____
 Change of Occupancy to Townhouse

For additions and changes in occupancy only: Will new construction include plumbing or HVAC? Yes No

Foundation: Conventional (crawl space with no slab) Slab and Footing cast separately (for finished living areas only) Slab and Footing cast monolithically (for finished living areas only)

Basement: Yes No

Number of stories (not including basement) of new construction or addition: 1 2 3

Applicable on 3 story with basement only: I certify the finished surface of the floor above the basement is not more than 6 ft above grade plane, (b) is not more than 6 ft above the finished ground level for more than 50% of the total building perimeter or (c) is not more than 12 ft above the finished ground level at any point. Yes No

2. LOCATION OF CONSTRUCTION

Street #: _____ Prefix: _____ Street Name: _____ Suffix: _____

City: _____ County: _____ ZIP: _____

Is this property within the city limits? No Yes City, if different from mailing address: _____

Parcel ID #: CtrlMap: _____ Grp: _____ Parcel: _____ Example: 089 A 030.22

For information on your Parcel ID #, please visit <http://www.assessment.state.tn.us>
If this property is part of a parent parcel that has not been assigned a Parcel ID #, please use the parent parcel's ID #.

3. OWNER FIRST NAME: _____ **LAST NAME:** _____

Street #: _____ Prefix: _____ Street Name: _____ Suffix: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

4. PERMIT FEES

Project Contract Total (Copy required): _____

Total Permit Fees:

5. ADDITIONAL APPROVALS

OUTSIDE AGENCIES	REQUIRED	APPROVED	NOT REQUIRED
STATE OF TENNESSEE DIVISION OF FIRE PREVENTION			
STATE OF TENNESSEE DIVISION OF GROUNDWATER PROTECTION			
PLANNING COMMISSION			
HIGHWAY DEPARTMENT			
WATER DEPARTMENT			
SANITATION DEPARTMENT			
CANEY FORK ELECTRIC			
FIRE DEPARTMENT			

6. INSPECTIONS

INSPECTIONS	REQUIRED	APPROVED	NOT REQUIRED
FOOTING OR MONOLITH SLAB			
SLAB OTHER THAN MONOLITH			
FRAMING ROUGH-IN			
INSULATION			
PLUMBING ROUGH-IN			
PLUMBING FINAL			
MECHANICAL ROUGH-IN			
MECHANICAL FINAL			
FINAL			



CONTRACTOR NAME: _____

Address: _____

City: _____ State: TN ZIP: _____

Phone: _____ Email: _____

Contractor License #: _____ Classification: BC BC-A BC-B

APPLICANT SIGNATURE

I hereby certify that I have completely read the important notices document and truthfully completed this application and that I have complied with the Business licensing and Workers' Compensation laws of the State of Tennessee*, that I am properly licensed pursuant to T.C.A. Title 62, chapter 16 and I certify availability of a public sewer or obtainment of a septic permit and all licenses or permits required by state or local law or ordinance.

Signature of contractor/authorized agent Date

** Questions regarding Workers' Compensation should be directed to the Tennessee Department of Labor and Workforce Development at 615-741-2395 or www.tn.gov/labor-wfd/wcomp*