BUILDING PERMIT APPLICATION **Smith County Planning Department** 303 High Street North, Carthage, TN 37030 Ph: 735-3418 Fax: 735-1534 **DATE:** PROPERTY OWNER: NAME OF OCCUPANT(S) **CURRENT ADDRESS:** (Mailing address) **WORK: CELL:** PHONE #'S: HOME: **EMAIL:** The State of TN has adopted the International Building Codes. Therefore, a licensed contractor is required by 62-6-103 TCA. It is the responsibility of the property owner to ensure that the contractor is properly licensed. It is allowable to do a self build if you haven't built a home in the last two years. NAME OF CONTRACTOR: LOT/TRACT SIZE **ACRES - ROAD FRONTAGE** FT. DETAILED DESCRIPTION OF THE PROPOSED LOCATION (include adjacent property owner name and address, if known) ARE THERE ANY EXISTING STRUCTURES ON THE PARCEL/LOT/TRACT/ACERAGE/FARM: THE PERMIT IS FOR: (Circle one) RESIDENTIAL (\$755) COMMERCIAL(\$805) INDUSTRIAL(\$1005) ESTIMATED COST OF CONSTRUCTION: IF RESIDENTIAL: (Circle one) NEW CONSTRUCTION MANUFACTURED HOME MOBILE HOME **OTHER DIMENSIONS: SQUARE FOOTAGE: DESCRIPTION OF THE STRUCTURE: (Outside color scheme)** YEAR BUILT: FOUNDATION OR SKIRTING (Circle one) source of: HEATING: **COOLING: UTILITY DISTRICT WATER:** WELL: **SEWER: SEPTIC:** (attach permit) I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE: APPLICANT'S SIGNATURE COMPLETED BY PLANNING DEPT.: **GROUP** FLOODPLAIN MAP TAX MAP PARCEL ZONE PAYMENT_ Septic Permit_ 911 Address_ Zoning Compliance Inspection