



Commercial Plans Review Application

Requirements for Commercial Plans Review

All drawings must be scaled at 1/16" or larger.

Two (2) sets of professionally drawn plans or three (3) sets if food service related. Plans must be sealed and signed by an architect or engineer. A PDF copy on CD/DVD is also required.

Required set of plans are - Building, Mechanical, Electrical, Plumbing and Site plan (for land disturbance). You must show what's existing and what is new. Include electrical, plumbing and mechanical riser diagrams. Building elevations must show finish materials and include all required schedules.

Cover sheet must include name of project, statement of codes used, construction type, occupancy type, and if structure is sprinkled and/or protected.

Preferable plan sheet is 24" X 36". We will not accept drawings over 24" x 36".

Plans Review Submittal Package:

- A. Commercial Plan Review Application (please note above requirements)
- B. Applicable sets of plans
- C. Fire Marshal approval or waiver form.

The Following Documents may be required if Applicable

- Environmental Health Department Approval for projects on private sewer or food service.
- Transportation and Development Department grading permit for new construction only.
- Water Authority Approval or wavier for plans involving food service or oil discharge.
- Site plans needed for all land disturbance activities.

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Community Development Department

121 South McDonough Street, Jonesboro GA 30236

Office: (770) 477-3569

www.claytoncountyga.gov/departments/community-development



PATRICK EJIKE
DIRECTOR

Commercial Plans Review Application

Job Address [Shaded areas for office use only]

Plan Rev-#:		Zoning:		Parcel #:		Date Processed:	
Job Address:				City	State	Zip	Unit/Suite#
Building No.	Plan Type	Floor No.	Apt/Lot#	Block	Project Name:		

Property Owner

Architect/Engineer

Name				Name			
Address				Address			
City		State	Zip	City		State	Zip
Tel#	Mobile #	Fax #		Tel#	Mobile #	Fax #	
Email				Email			

Builder/Contractor

Check Construction Type (New Construction/Additions)

Name				<input type="checkbox"/> Type IA <input type="checkbox"/> Type IIA <input type="checkbox"/> Type IIIA <input type="checkbox"/> Type IV <input type="checkbox"/> Type IB <input type="checkbox"/> Type IIB <input type="checkbox"/> Type IIIB <input type="checkbox"/> Type VA <input type="checkbox"/> Type VB			
Address							
City		State	Zip				
Tel#	Mobile #	Fax #					
Email							

Job Information

Occupancy Type: <input type="checkbox"/> Retail <input type="checkbox"/> Apartment <input type="checkbox"/> Assembly <input type="checkbox"/> Business <input type="checkbox"/> Education <input type="checkbox"/> Storage <input type="checkbox"/> Mercantile <input type="checkbox"/> Factory/Industrial <input type="checkbox"/> Other _____							
TYPE OF WORK <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Demolition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Damage Assessment <input type="checkbox"/> 80% Shell Only <input type="checkbox"/> Slab Only <input type="checkbox"/> 20% Interior Finish				SCOPE OF WORK			
Estimated Cost (construction or move-in cost) \$				Adjusted Estimated Cost (ICC) \$			

Structure Details:

INDICATE ALL ADDITIONAL WORK REQUIRED TO COMPLETE THIS JOB:							
<input type="checkbox"/> Electrical <input type="checkbox"/> HVAC <input type="checkbox"/> Plumbing <input type="checkbox"/> Hood System <input type="checkbox"/> Low Voltage <input type="checkbox"/> Fire Sprinklers <input type="checkbox"/> Gas							
Fire Sprinkler system?		SANITARY FACILITIES			CHECK ONE: ELEVATORS?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Public Sewer <input type="checkbox"/> Private Sewer <input type="checkbox"/> Septic			<input type="checkbox"/> Yes (# of Elevators) _____ <input type="checkbox"/> No		
Total Square Footage:		# of Stories:		# of Spaces/Units:		# of Kitchens:	# of Bedrooms:

** Note: Only the Property Owner, Architect or General Contractor should sign this application. EXCEPTION: If a tenant is applying to move into a commercial space, then the tenant should sign.

Signature of Applicant _____

Date _____