City of Fort Valley 204 West Church Street Fort Valley, GA 31030 www.fortvalley.org	**Driveway Permit Application**

☐ **Residential** ☐ **Commercial** ☐ **Existing/Repair**	**Date: _____ /_____ /_____** **Permit No. _____** **Estimated Cost of Construction (Labor and Materials): $_____**

JOB SITE ADDRESS: **LOT/ SUITE #:**

Property Use:	Zoning Class.:

I understand that I must follow MUTCD Pedestrian Signage guidelines during this project. Initial here: _____
Applicant must acknowledge understanding by initialing item. Guidelines found at https://mutcd.fhwa.dot.gov/

Property Owner	Name:		
	Address:	State: Zip:	Phone: Email:
Contractor	Name:	Occupational Tax License No.:	
	Address:	State: Zip:	Phone: Email:

CONSTRUCTION INFORMATION

WIDTH: _____ LINEAR FEET: _____

YARD LOCATION: ☐ FRONT ☐ SIDE ☐ REAR

CULVERT: ☐ YES ☐ NO CULVERT DIAMETER: _____

MATERIAL: ☐ METAL ☐ CONCRETE ☐ PLASTIC

☐ OTHER (EXPLAIN) _____

TYPE OF DRIVEWAY

☐ DIRT

☐ GRAVEL

☐ CONCRETE

☐ ASPHALT

☐ OTHER (EXPLAIN) _____

This permit application must be accompanied by a detailed site plan showing property boundary lines, the location of all structures on the property and the location of the proposed/existing driveway.

This application must be accompanied by a detailed construction drawing for culvert installation.

Notice: No changes shall be made from that which is stated in this application, or in attached plans and specifications, except by submitting a revised application, plans and/or specifications and receiving approval of the Chief Building Inspector for such change. Granting of a permit shall not be construed as a permit for or an approval of any violation of the Building Code or any other state or local law regulating construction or the performance of construction. I hereby certify that I have read and examined this application and the information provided herein is true and correct. I further certify that all construction will comply with the Minimum Building Codes.

x Signature of Applicant:	**x** Date:

FOR OFFICE USE ONLY	Accepted by:

Administrative Fee:	Plan Review Fee:	Permit Fee:	CC Fee:	Total Fee:
$ _____	$ _____	$ _____	$ _____	$ _____