CITY OF ATHENS
PLANS REVIEW

IMPORTANT PLEASE COMPLETE QUESTIONS:

Description of Project: _____
Type of Project (check one) New Construction: [ ] Renovation: [ ] Addition: [ ]

Project Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Project Owner: _____
Contact Person: _____ Phone #: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Project Architect / Engineer: _____
_____
A/E Firm: _____
Contact Person: _____ Phone #: _____
Address: _____
City: _____ State: _____ Zip Code: _____

SPRINKLER CONTRACTOR: _____
_____
Contact Person: _____ Phone #: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Construction Start (approximate date): _____ Completion Date: (estimated date): _____

Occupancy Type (as defined by the IBC): _____

Construction Type (as defined by the IBC)

CHECK ONE: **IA** ☐ **IB** ☐ **IIA** ☐ **IIB** ☐ **IIIA** ☐ **IIIB** ☐ **IV** ☐ **VA** ☐ **VB** ☐

One Hour Protected: Yes ☐ No ☐ Sprinkled: Yes ☐ No ☐

Height: _____ Number of Stories: _____

Building Area (as defined by the IBC)

New Construction: _____ Largest Floor Sq. Ft.
Existing Construction: _____ Largest Floor Sq. Ft
Total (All Floors): _____ Sq. Ft.
Total (all floors): _____ Sq Ft.
Existing Building Construction Type: _____

I hereby certify that, to the best of my knowledge and belief the total construction cost for this project will be:

Estimated Construction Cost: _____ ***Review Fees Due:*** _____

_____

_____ _____ _____
Owner or Representative Name (please print) **Signature** **Date**

Fees can be found under BUILDING VALUATION TABLE & REVIEW FEES, on the City of Athens web site.