



# BARTOW COUNTY

Community Development Department

Steve Taylor, Sole Commissioner

Lamont Kiser, PE, CFM, Director

Bartow County Building Official  
Todd Gregory  
135 W. Cherokee Ave, Ste. 124  
Cartersville, Ga. 30120  
Office: 770-607-6266  
Email: [gregoryt@bartowga.org](mailto:gregoryt@bartowga.org)

Bartow County Fire Marshal  
Gary Garland  
5435 Hwy 20 N.E.  
Cartersville, Ga. 30121  
Office: 678-721-5495  
Email: [garlandg@bartowga.org](mailto:garlandg@bartowga.org)

*\*Plan submittal and pick up may be done Monday thru Friday from 8:30 a.m. till 4:30 p.m. at the Bartow County Community Development Office located at 135 W. Cherokee Ave., Suite 124 Cartersville, Ga. 30120.*

*\*Site Plan submittal for fire marshal review will require at least 2 sets of drawings, submittal application and review fees.*

*\*Structural/Architectural for fire marshal and building official review will require at least 3 sets of drawings, submittal application and review fees. If the drawings fall under the state fire marshal's office, their approval is required prior to submittal to the building official for review.*

*\*After drawings are approved an electronic copy will be required. Please contact a member of community development for further details. A FINAL CERTIFICATE OF OCCUPANCY MAY NOT BE RELEASED UNTIL THIS REQUIREMENT IS SATISFIED.*

## PLAN REVIEW SUBMITTAL APPLICATION

Contact Person (for pickup of plans and/or comments): \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Project Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

Parcel Id #: \_\_\_\_\_ (can be found on Tax Assessors website)

Property Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Engineer: \_\_\_\_\_ State Lic. #: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Architect: \_\_\_\_\_ State Lic. #: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Fire Alarm Contractor: \_\_\_\_\_ Lic. #: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Fire Sprinkler Contractor: \_\_\_\_\_ Lic. #: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Type of Occupancy: (Mark all that apply for mixed use) NFPA 101

Education \_\_\_\_\_ Rooming House \_\_\_\_\_ Storage \_\_\_\_\_ Mercantile \_\_\_\_\_ Apt. Bldg \_\_\_\_\_

Industrial \_\_\_\_\_ Business \_\_\_\_\_ Hotel/Dormitory \_\_\_\_\_ Day Care \_\_\_\_\_ Health Care \_\_\_\_\_

Boarding House \_\_\_\_\_ Tent \_\_\_\_\_ Ambulatory Healthcare \_\_\_\_\_ Detention/Corrections \_\_\_\_\_

Residential Board & Care \_\_\_\_\_ Special Structure (specify) \_\_\_\_\_

Place of Assembly \_\_\_\_\_ \*If Assembly, specify approximate occupant load \_\_\_\_\_

\*\*For Restaurants with occupant load <50 use mercantile: Class A>100 Class B 301-1000 Class C 50-300

Is this a change of occupancy from previous usage? \_\_\_\_\_ YES or \_\_\_\_\_ NO

Type of Work Proposed: (Mark all that apply)

New Building (total square ft) \_\_\_\_\_ Square ft. per Floor \_\_\_\_\_

Addition (sq. ft. of addition) \_\_\_\_\_ Total Bldg Sq. Ft. \_\_\_\_\_

Renovation (sq. ft. of reno) \_\_\_\_\_ Total Bldg. Sq. Ft. \_\_\_\_\_

Other (open pit burn, vent hood, above ground fuel tanks of 600 gallons or less, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of work being performed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fire Protection Information (currently in place)

Sprinkler System – Full \_\_\_\_\_ Partial \_\_\_\_\_ Wet \_\_\_\_\_ Dry \_\_\_\_\_ Other \_\_\_\_\_ None \_\_\_\_\_

Standpipe System – Full \_\_\_\_\_ Partial \_\_\_\_\_

Fire Alarm System – Local \_\_\_\_\_ Municipality Connected \_\_\_\_\_ Box # \_\_\_\_\_ High Rise \_\_\_\_\_

Box # \_\_\_\_\_

Fire Protection Information (proposed)

Sprinkler System – Full \_\_\_\_\_ Partial \_\_\_\_\_ Wet \_\_\_\_\_ Dry \_\_\_\_\_ Other \_\_\_\_\_ None \_\_\_\_\_

Standpipe System – Full \_\_\_\_\_ Partial \_\_\_\_\_

Fire Alarm System – Local \_\_\_\_\_ Municipality Connected \_\_\_\_\_ Box # \_\_\_\_\_ High Rise \_\_\_\_\_

Box # \_\_\_\_\_

ESTIMATED COST OF CONSTRUCTION: (with MEP's) \_\_\_\_\_

ESTIMATED COST OF CONSTRUCTION: (without MEP's) \_\_\_\_\_

Please Mark According to the Drawings You Are Submitting:  
(Mark ALL that apply)

- Site \_\_\_\_\_yes \_\_\_\_\_no \_\_\_\_\_n/a
- Steel Building \_\_\_\_\_yes \_\_\_\_\_no \_\_\_\_\_n/a
- Shell \_\_\_\_\_yes \_\_\_\_\_no \_\_\_\_\_n/a
- Structural \_\_\_\_\_yes \_\_\_\_\_no \_\_\_\_\_n/a
- Architectural \_\_\_\_\_yes \_\_\_\_\_no \_\_\_\_\_n/a
- Electrical \_\_\_\_\_yes \_\_\_\_\_no \_\_\_\_\_n/a
- Plumbing \_\_\_\_\_yes \_\_\_\_\_no \_\_\_\_\_n/a
- HVAC \_\_\_\_\_yes \_\_\_\_\_no \_\_\_\_\_n/a

**I hereby certify that I have the authority to make the foregoing application, that the application is correct and that the owner of this building and the undersigned agree to comply with applicable fire codes of the State of Georgia and the applicable building codes of the State of Georgia and the Bartow County Building Ordinances.**

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date