



BUILDING PERMIT APPLICATION

☒ **COMMERCIAL** ☐ **RESIDENTIAL**

✧ Submit your application via the customer service portal at eTRAC.savannahga.gov. ✧

✧ Contact Development Services at (912)651-6510 for assistance. ✧

✧ You may also submit your Building Permit Application in person at 20 Interchange Dr. (31415). ✧

Project Site

Project/Business Name: 24 EAST BROUGHTON ST. RENOVATION AND ADDITION PIN: 20004 38003

Project Address: 24 EAST BROUGHTON STREET

Contacts

Property Owner: TRAVIS STRINGER Email: TSTRINGER@FORAMGROUP.COM

Address: 2602 BARNARD STREET City, State, Zip: SAVANNAH, GA, 31401 Phone: 305-772-2803

Who will be responsible for this work? ☐ Property Owner ☐ Tenant ☐ Authorized Agent ☒ Contractor

Name: TBD Email: _____

Address: _____ City, State, Zip: _____ Phone: _____

Who do we contact for design explanations? ☐ Property Owner ☐ Contractor ☒ Design Professional

Name: JAMES GALLUCCI Phone: 631-513-6370 Email: JAMES@PANTHEONADC.COM

Class of Work

- ☐ New ☒ Addition ☒ Renovation/Repair ☐ Shell Build Out ☐ Manufactured/Modular
- ☐ Master Plan: Number _____ ☐ Other Building Related (Example: barn, shed, roofing, siding, porch/deck, windows)
- ☐ Other Non-Building Related (Example: swimming pool) NOTE: For demolition, sign, or fence, fill out separate application.

Proposed Use or Activity for this Permit

COMMERCIAL:

- ☐ Amusement/Recreational
☐ Antenna/Tower
☒ Assembly/Church

- ☐ Barber Shop/Salon
☐ Educational
☐ Factory/Industrial
☐ Hospital/Institutional

- ☐ Hotel/Motel
☒ Mercantile/Retail
☐ Multi-family (3+ units)
☒ Office/Professional

- ☐ Parking Garage
☐ Restaurant
☐ Shell
☐ Storage

RESIDENTIAL:

- ☐ Single Family
☐ Duplex
☐ Townhouse
☐ Garage/Carport

Current/Prior Use or Previous Business Name at this location: ☐ Same ☐ Other: _____

Description of Work

Complete Description of Work: Conversion of a 2-story retail space that has a bar/restaurant on a newly added 3rd floor. The

2nd floor renovation converts retail to office. Building Square Footage: ± 14,100 SF # Stories: 3

☒ Primary Structure ☐ Accessory Structure – Attached ☐ Accessory Structure – Detached

Work to include: ☒ Electrical ☒ Plumbing ☒ Mechanical/HVAC ☐ Low Voltage ☒ Sprinkler/Fire Alarm

Are Special Inspections required for this project? ☒ Yes ☐ No If yes, who will be responsible for this work?

Owner

Is this a Property Maintenance Violation or Warning? ☐ Yes ☒ No If Yes, attach write-up from Property Maintenance Dept.

VALUATION OF JOB:

\$ 3,000,000

(COMMERCIAL: Estimate \$125 per SF for labor, materials & profit)

(RESIDENTIAL: Estimate \$80 per SF for labor, materials & profit)

General Contractor Information

Name: TBD License #: _____ Expiration Date: _____

Address: _____ City, State, Zip _____

Phone: _____ Email: _____

Georgia Licensed Subcontractors to Work on Project

Electrical _____ Phone: _____

Plumbing _____ Phone: _____

Mechanical/HVAC _____ Phone: _____

Low Voltage _____ Phone: _____

Design Considerations

Water Service: ☒ City of Savannah ☐ Private Well ☐ Other: _____ Location & Size of Water Main: _____

Sewer Service: ☒ City of Savannah ☐ Septic Tank ☐ Other: _____ Location & Depth of Sewer Main: _____

Is property in a designated wetland? ☐ Yes ☒ No If yes, attach copy of engineer's letter.

The property is in Flood Zone X If the structure is located in a Special Flood Hazard Area (SFHA), there may be additional requirements that must be met. Contact the City's Floodplain Administrator at (912) 651-6510 for more information.

How many existing electrical meters?: 1 How many additional new meters?: 3

Is this project in a historic district? ☒ Yes ☐ No If Yes, is exterior work being performed? ☒ Yes ☐ No

If Yes, has a Certificate of Appropriateness (COA) been issued? ☒ Yes ☐ No

If Yes, plans must be stamped by the Historic Preservation Officer and a copy of the COA must be provided.

If No, contact the **Historic Preservation Office** at (912)651-1440.

Applicant Certification

I hereby certify that I have answered all of the questions contained herein and know the same to be true and correct. All work performed under this permit must comply with State Law and local ordinances. Further, I understand that any permit issued, based upon false information or misrepresentation provided by the applicant, will be null and void and subject to penalty as provided by law and ordinance.

I hereby certify that I have verified access to city water and sewer services for this property. Any necessary connection and requirements for service have been included in the design of these plans. If necessary, a separate Site Plan Application has been or will be submitted for review.

I understand there may be water and sewer impact fees that must be paid prior to the completion of this project.

JAMES GALLUCCI
Printed Name of Applicant (Not Company Name)

J. Gallucci
Signature of Applicant

11/1/2022
Date

Note: For permit fee information, contact Development Services, view the City's Revenue Ordinance, or visit www.savannahga.gov and view the Building Permit Fees document. Fees can be paid by check or money order (no cash), or they can be paid online through eTRAC.

✧ Note: For **Commercial Building Renovations**, submit signed and approval "Water & Sewer Approval Form", unless a Site Development Permit is required for the project. ✧

FOR OFFICE USE ONLY

No Plans Submitted: _____ Zoning District: _____ Zoning Use: _____

Constr. Type: _____ Report Code: _____ Occupancy Type: _____

Flood Zone: ☒ X ☐ A ☐ AE ☐ VE LOMA: _____ COA Approved: _____

Firm Map #13051C- _____ -F BFE Cert. Needed: ☐ Yes ☐ No

Contractor Validation: ☐ Yes ☐ No Homeowners Affidavit: ☐ Yes ☐ No

Plan Review Fees: Total: \$ _____

Paid: \$ _____ Bal.: \$ _____ Chk/MO#: _____

Permit Fees: Total: \$ _____

Paid: \$ _____ Bal.: \$ _____

Chk/MO#: _____ Notes: _____

Reviewed by: Flood: _____ Zoning: _____ Building: _____ Life Safety: _____ Elect: _____ Plumb: _____ Mech: _____