



- ✧ Submit your application via the customer service portal at [eTRAC.savannahga.gov](http://eTRAC.savannahga.gov). ✧  
✧ Contact Development Services at (912)651-6510 for assistance. ✧  
✧ You may also submit your Demolition Permit Application in person at 20 Interchange Dr. (31415). ✧

### Demolition Project

Site Address: 1375 CHATHAM PKWY PIN: 20834 01012  
Owner's Name: SAVANNAH CHATHAM PARKWAY PROPERTY LLC Email: berry.smith@morris.com  
Owner's Address: 725 BROAD ST City/State: AUGUSTA/ GA  
Phone: 706-339-4352 Valuation of Job (Include Labor, Materials, Profit): \$ 12,000.00

### Description of Work

Complete Description of Work: REMOVE PARTITION WALLS (NON-LOAD BEARING).  
REMOVE PARTITION WALLS (NON-LOAD BEARING).

### Structure Type

<input type="checkbox"/> Residential		<input checked="" type="checkbox"/> Commercial	
<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family / Duplex		<input type="checkbox"/> Multi-Family (3 or more units) <input type="checkbox"/> Office <input type="checkbox"/> Retail <input type="checkbox"/> Other _____	
<input type="checkbox"/> Full Demolition of Structure		<input type="checkbox"/> Partial Demolition of Structure	
<input type="checkbox"/> Primary Structure		<input type="checkbox"/> Accessory Structure – Attached <input type="checkbox"/> Accessory Structure – Detached	
<input checked="" type="checkbox"/> Demo-Interior		<input type="checkbox"/> Demo-To-Slab <input type="checkbox"/> Demo-Total # of Stories: _____ Square Footage: _____	
Is Demolition due to fire? <input type="radio"/> Yes <input checked="" type="radio"/> No		Is Demolition ordered by the City of Savannah? <input type="radio"/> Yes <input checked="" type="radio"/> No	
Is the property more than 40 years old? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, please refer to the attached for Documenting Buildings Prior to Demolition. City ordered demolitions do not have to comply with this requirement.			

### Contractor

Company: THOMPSON BUILDING WRECKING CO. INC. Business Phone: 706-722-1432  
Contact Name: JP GOULET Cell: 706-533-9401 Email: susaniuker@thompsonwrecking.com

### Licensed Plumber

(Note: See below requirements for sewer and cap of the existing sewer lateral.)

Plumber: \_\_\_\_\_ Phone: \_\_\_\_\_



### Requirements

\*\*\* The following items must be completed before a demolition permit can be issued. \*\*\*

- ☐ **Sewer Lateral Sever & Cap at property line:** For full demolition of a structure, a Georgia licensed plumber must cap the sewer lateral. The plumber must sever the lateral and then call for an inspection from Development Services at (912) 651-6530. To coordinate the collection of the water meter, the plumber is required to contact the Water Department at (912) 651-6593.
- ☐ **Park & Tree Dept.:** The contractor must contact the Park and Tree Department at (912) 651-6610 to review tree protection procedures.
- ☐ **Rodent Certification:** Obtain a certification from a licensed exterminator indicating rodent extermination services have been initiated at least two weeks prior to the planned demolition.
- ☐ **EPD:** Written notification to the Georgia Environmental Protection Division (EPD) 10 days prior to demolition.
- ☐ Permit Fee must be paid: \$40 per floor for each structure removed or \$8 per \$1,000 of contract value, whichever is greater.
- ☐ Proper documentation must be filed with Municipal Archives for buildings older than 40 years of age.

**Note:** For commercial demolition, a site development permit may be required.

### 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.

Jean-Paul Goulet  
Printed Name of Applicant (Not Company Name)

Jean-Paul Goulet  
Signature of Applicant

3/17/2023  
Date

#### FOR OFFICE USE ONLY

Zoning District: \_\_\_\_\_

COA Approved: \_\_\_\_\_

Zoning Use: \_\_\_\_\_

**Permit Fees:** Total Permit: \$ \_\_\_\_\_ Due: \$ \_\_\_\_\_ Paid: \$ \_\_\_\_\_ Chk/MO#: \_\_\_\_\_

Rem. Bal.: \$ \_\_\_\_\_ Rem. Paid: \$ \_\_\_\_\_ Chk/MO#: \_\_\_\_\_

Plans Reviewed by: Flood: \_\_\_\_\_ Zoning: \_\_\_\_\_ Building: \_\_\_\_\_ Life Safety: \_\_\_\_\_ Elect: \_\_\_\_\_ Plumb: \_\_\_\_\_ Mech: \_\_\_\_\_