



Forsyth County Department of Building and Licensing
110 E. Main Street, Suite 100 | Cumming, Georgia 30040 | (770) 781-2114 | forsythco.com

RESIDENTIAL BASEMENT FINISH

PERMIT PACKET

CHECKLIST

NOTE: Permit applications may be submitted electronically through the Customer Service Portal or in person at our office. You can submit the permit application and upload required documents to the CSS portal at: https://css.forsythco.com/Energov_Prod/selfservice/

Please complete the entire application package, including:

- **Permit Details Form**
- **Required Contractor Documents:** Forms/Affidavits must be signed and Notarized. Do not provide copies of Driver's License.
 - **Authorized Agent Form:** General Contractor. Include current Business License and copy of State License.
 - **Sub-Contractor Affidavits:** Electrical, Mechanical, Plumbing (as needed). Include current Business License and copy of State License.
- **Owner/Contractor Exemption:** Required documents if owner will be obtaining permit as the Owner/Contractor.
 - **Self-Work Affidavit** - Required to be Notarized. Select trades to be covered by Owner/Contractor. Submit Sub-Contractor Affidavits for any trades not covered by the Owner/Contractor.
- **Basement Floor Plan:** Scaled drawing. 1 Copy (8 1/2 x 11). Label all rooms.
- **Environmental Health Approval:** Required if on septic. Obtain at Forsyth County Environmental Health (770-781-6909) prior to submitting permit application.
- **Temporary Toilet:** Required if no toilet facilities available on site. Obtain at Forsyth County Health Department (770-781-6909) prior to submitting permit application.
- **Fees:** Accepted forms of payment: cash, check, Visa, or MasterCard. See the Forsyth County website for the fee schedule: <https://www.forsythco.com/Departments-Offices/Building-Licensing>

GENERAL INFORMATION

Minimum inspections required for Basement Finish (Renovation) permit:

- Underground Plumbing (if needed)
- Combination Rough
- Insulation (if needed)
- Temp-to-Perm (if needed)
- Combination Final

For questions about what the required inspections include, or how to schedule inspections, please contact our Inspection Scheduling Team: **(770)781-2114 Option #1.**

In accordance with R314.2.2 and R315.2.2 of the 2018 IRC, smoke alarms and carbon monoxide alarms shall be required and will be inspected/tested in accordance with sections R314 and R315.

Revised 4/2025

PERMIT DETAILS FORM

PROPERTY ADDRESS INFORMATION

Site Address: _____ City/State/Zip: _____

Subdivision Name and Lot # (if applicable): _____ Lot #: _____

CONTRACTOR INFORMATION (if applicable)

Business Name: _____ GA State License # _____

Email: _____ Phone# _____

PROPERTY OWNER INFORMATION

Last Name: _____ First Name: _____

Address: _____ City/State/Zip: _____

Email: _____ Phone: _____

PROJECT INFORMATION

Description of work: _____

Square footage of basement area being finished? _____ Total # Bathrooms: _____

Total # Bedrooms _____ Are you adding additional bedrooms to the home? Yes ___ No ___

Sewer System: Septic ___ Sewer ___ Private ___ Are you adding a garbage disposal? Yes ___ No ___

AUTHORIZED SIGNATURES

The undersigned states that the above information is true and correct, understands that the permit issued is only for the construction as stated and that occupancy is not permissible until all inspections and code requirements are met and a Certificate of Occupancy has been issued by Forsyth County.

Applicant's Name: _____

Applicant's Signature: _____

_____ Date

Property Owner's Name: _____

Property Owner's Signature: _____

_____ Date

Will the proposed work result in the structure being converted into or used as a two-family dwelling (duplex), as defined by the Forsyth County Unified Development Code? YES NO

****Permit cards are to remain onsite until a Certificate of Completion has been obtained****



**State Licensing Board for Residential and General Contractors
Authorized Permit Agent Form**

Licensed Contractor: _____ Individual _____ Qualifying Agent

Name of Licensed Person: _____

Please attach a copy of Individual License or Company License

License Number of Individual or Qualifying Agent: _____

Please attach copy of Qualifying Agent License

Name of Licensed Company (if applicable): _____

License Number of Company (if applicable): _____

I, _____ hereby designate
(Licensed Individual or Qualifying Agent)

_____ to apply for and obtain permits.

AUTHORIZED SIGNATURE

I, the undersigned, being the contractor as either an individual or a qualifying agent, do hereby affirm and swear, under oath, that all information on this form and on accompanying documents are true and correct.

Signature of Individual or Qualifying Agent _____

State of _____ County of _____

Subscribed and sworn to me before me this _____ day of _____, 20_____

Notary Public Signature

Seal

ELECTRICAL SUB-CONTRACTOR AFFIDAVIT

Site Address: _____

This is to certify that I am responsible for the **Electrical** installation and compliance with all applicable codes. I understand that Forsyth County requires Temporary Power Connection to Service Utilities before final inspection. I relieve Forsyth County and its Inspectors from any liability for damages, or loss of property or improper installation.

Company Name

State License #

Licensed Electrical Contractor Signature

Notary Public Signature and Stamp

Date

Do you have a restricted license? Yes No

if yes, Is the scope of this work within the license restriction (Residential, Single Phase, maximum 400 amps)?

Yes No

Licensed Electrical Contractor Signature

Date

MECHANICAL SUB-CONTRACTOR AFFIDAVIT

Site Address: _____

This is to certify that I am responsible for the **Mechanical** installation and compliance with all applicable codes. I relieve Forsyth County and its Inspectors from any liability for damages, loss of property or improper installation.

Company Name

State License #

Licensed Mechanical Contractor Signature

Notary Public Signature and Stamp

Date

Do you have a restricted license? Yes ____ No ____

If yes, is the scope of this work within the license restriction (Maximum 175,000 BTU heating, maximum 60,000 BTU cooling)?

Yes ____ No ____

Licensed Mechanical Contractor Signature

Date

PLUMBING SUB-CONTRACTOR AFFIDAVIT

Site Address: _____

This is to certify that I am responsible for the **Plumbing** installation and compliance with all applicable codes. I assume all responsibility and liability for the installation of the building sewer and water lines. I understand that it is my responsibility to ensure that the sewer and water lines are installed in compliance with the Georgia Minimum Plumbing Code and any local ordinances. Ordinances may be obtained from Forsyth County/City of Cumming.

I also understand that Forsyth County/City of Cumming requires a cleanout at sewer tap. I relieve Forsyth County/City of Cumming and its Inspectors from any liability for damages loss of property or improper installation.

Company Name

State License #

Licensed Plumber Contractor Signature

Utility Contractor Signature (if applicable)

Notary Public Signature and Stamp

Date

Do you have a restricted license? Yes ____ No ____

If yes, is the scope of work within the license restriction (Single-family dwellings, one-level dwellings designed for no more than 2 families and commercial structures not exceeding 10,000 sq ft)? Yes ____ No ____

Licensed Plumber Contractor Signature

Date

When installing an irrigation system if connecting to an existing water supply line backflow protection and rain sensor will be verified at time of Final Plumbing inspection.