



Town of Kingston Springs
 Building and Codes Department
 PO Box 256
 396 Spring Street
 Kingston Springs, TN 37082
 T. 615-952-2110 ext. 4

Deck/Accessory Structure Permit Application

Property Owner Information:	
Project address:	
Phone Number:	
Email:	
Map/Parcel #:	

INTERNAL USE ONLY
Permit #:
Expiration Date:

Type of Property:	<input type="checkbox"/> 1-Family	<input type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial Property
Owners Name:	Owners Phone:		
Owners Address:	City:	State:	Zip:
E-mail:			

Contractor Information			
Company:		Contact Person:	
Address:		City:	State: Zip:
Phone:		State of TN License #:	
Cell:		Cheatham County Business License #:	
Email Address:			

Scope of Work:

Type of Work:	New Square Feet	Project Cost
<input type="checkbox"/> Deck		
<input type="checkbox"/> Garage/Shed		
<input type="checkbox"/> Pole Barn		
<input type="checkbox"/> Covered Porch/Patio		
<input type="checkbox"/> Other		

The information submitted in this Project Application may be used by the Town of Kingston Springs and/or any of its contractors or consultants. By signing below you certify that you are the owner of record of the named property, or that the proposed work has been authorized by the owner of record and that you have been authorized by the owner to make this application as his/her/their authorized agent. You agree to conform to all applicable laws, statutes, ordinances, and codes of this jurisdiction, including those adopted by reference. If the Town issues a permit for the work described in this Project Application, you certify that the Towns Code Enforcement Official or the Code Enforcement Official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the laws, statutes, ordinances, and codes applicable to such permit. I certify that the information and exhibits herewith are true and correct.

Property Owner Contractor

Signature: _____ Print Name: _____ Date: _____

DECK STRUCTURE WORKSHEET

EACH DECK/SECTION REQUIRES A SEPARATE WORKSHEET

Fill in spaces of check box where applicable:

Deck # _____	Height of Deck from Grade in inches: _____
Joist Size (2x8 minimum): 2 x _____ Span: _____	Actual Joist _____
Spacing of floor joists (check one): <input type="checkbox"/> 16" On-Center <input type="checkbox"/> 24" On-Center <input type="checkbox"/> Other	
Beam Size (double) 2" x _____	Beam Size (triple) 2" x _____ Actual Beam Span _____ <small>(longest span from post to post)</small>
<input type="checkbox"/> 4 x 4 Posts (5' max deck height)	<input type="checkbox"/> 6 x 6 Posts (14' max deck height)
<input type="checkbox"/> 4 x 6 Posts (5' max deck height)	<input type="checkbox"/> Other _____
<input type="checkbox"/> Deck will be attached to house/ structure	<input type="checkbox"/> Deck will NOT be attached to house/structure
If deck will be attached to house, footers must extend a minimum of 42" below grade. If deck will not be attached it must: Have 1" space between house and be between 4" and 8 1/4" from any door threshold. Decks shall not be attached to veneers, overhangs, or bay windows. If attached to house; size of Ledger Board: 2 x _____	
<input type="checkbox"/> 5/4 P.T. Decking Board <input type="checkbox"/> 2 x 6 P.T. Decking Board <input type="checkbox"/> Composite Decking (all types)	
Stairway Width (36" min.) _____ Stairway Tread Depth (9 3/4" min.) _____	
Stairway Riser Height (8 1/4" max.) _____	
Stairway Handrail Height (34" to 38" from nosing of each step) _____	
Guardrail Height (min. of 36" for walking surfaces 30" above adjacent grade/surface) _____	



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Site Plan

(May include on separate sheet)

	Distance to and location of any critical area, such as stream, creek, river, irrigation ditch, floodplain
	Street frontage
	Access/Driveway
	Lot lines and dimensions
	Location of all structures and specific use (any new buildings will require building permits)
	Location of well, septic, and drain field
	Distances between all structures and property lines
	Easements and/or right-of-way and any overhead or underground utility lines

I hereby certify that all work related to this application will be performed in accordance with all applicable Town and State laws and codes pertaining to building construction, and demolition and the information submitted and contained herein is accurate and correct. I further certify that I am the owner of record or an authorized agent of the property owner listed on this application and have authority to make application for work to be performed.

Property Owner Contractor

Signature: _____ Print Name: _____ Date: _____



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ZONING REQUIREMENTS

It is the responsibility of the applicant to comply with the placement of any improvements on a lot (footings, foundation, etc.) in accordance with the minimum required building setback lines on the front, rear, and side of the property. These requirements are set by the Zoning District the property is located in, as well as by other plans, plats or restrictive covenants of record. The Town of Kingston Springs and its planning commission will gladly provide information on setback requirements established by the town's zoning ordinance, but is not responsible for providing information or enforcing requirements from plats of record or restrictive covenants.

The applicant must determine that all minimum setback requirements are met and are strongly encouraged to use a licensed surveyor to establish certainty. Additionally, it is the applicant's responsibility to place the improvement within the building envelope and not encroach upon restricted lot areas such as the septic disposal field and public utility and drainage easements. Should this office question the placement of the building at the time of the footing inspection, a surveyor's certificate will be required. However, it may have a financial impact on the applicant with regard to third parties such as a mortgage lender. If you have any questions, please contact the Building Inspector.

I have read and understand the Town of Kingston Springs policy regarding setback requirements and I hereby certify that all work related to this application will be performed in accordance with all applicable town, and state laws and codes pertaining to building construction, and demolition and the information submitted and contained herein is accurate and correct. I further certify that I am the owner or an authorized agent of the property owner listed in this application, and have authority to make application for work to be performed.

Applicant Signature _____ Date: _____

Applicant Printed Name _____

OFFICE USE ONLY

APPLICANT DO NOT WRITE BELOW THIS LINE

Approved/Rejected:

Zoning/Land Use: _____ Date: _____

Building Official: _____ Date: _____

COMMENTS:

****DOUBLE PERMIT FEES WILL BE CHARGED FOR WORK STARTED PRIOR TO OBTAINING PERMITS****

Permit Fees:

Deck:	\$75.00	(32690)
Accessory Structure <200 sq.ft.:	\$75.00	(32690)
Accessory Structure >200sq.ft.:	\$75.00 plus 1% of project cost	(32690)

TOTAL PERMIT FEE: _____

Date Paid: _____

Amount Paid: _____

Receipt Number: _____