



FEES & INFORMATION

1. **Site Review (615-355-5706)** Planning Department
 - Annexation / Rezoning Request \$200.00
 - Concept Plan or Sketch Plat \$150.00
 - Preliminary Plat Subdivision (\$300.00 plus \$50.00 per lot)
 - Final Plat Subdivision (\$200.00 plus \$25 per lot)
 - Site Plan (\$300.00 plus \$.03 cents per square foot of building)
 - Board of Zoning Appeals (\$200.00)
2. **Grading Permit (615-355-5701)** Greg Upham (*see application for specifics*)
 - Storm Water Fee: \$200 plus \$100/acre
 - Grading Permit Fee: \$150.00
 - Engineering Review Fees – Based on Costs Incurred
 - Application Fee for Grading - \$25.00
3. **Building Permit (615-355-5704)** Codes Department
 - Requirements: Current State of Tennessee Contractors License & Workers Comp Insurance
 - Commercial - \$.30 cents per square foot – (minimum \$100.00)
 - Industrial - \$.30 cents per square foot – (minimum \$300.00)
 - Multi-Family - \$.30 cents per square foot – (minimum \$30.00) & Development Tax from Rutherford County
 - Shell permits - \$.15 cents per square foot – (minimum same as above)
4. **Plan Review (Building Permit) (615-355-5704)** Codes Department
 - Plan Review Calculation Multi Family & Commercial/Industrial Fee: ½ of permit fee (min\$100 & max \$5,000)
 - Preliminary Fee due upon plans submittal; Remaining Fee due at time permit is purchased
 - Preliminary Calculation: Square Footage: _____ x .15 - \$100 = _____ = Preliminary Plan Review Fee
 - Shell Preliminary Calculation: Square Footage: _____ x .075 - \$100 = _____ = Preliminary Plan Review Fee
 - May take up to 2 weeks to complete review & two complete sets of plans required
 - *See Plans Submittal Requirements page for more information*
5. **Tap Fees (615-355-5740)** Utilities Department *Gas, Water, Sewer*
 - Fee must be paid before final work order request is processed
 - see “Water Customer Data Sheet” for specifics
6. **Impact Fee (615-355-5706)** Town Planner
 - Fee must be paid before final work order request is processed
7. **Other Fees**
 - Development Tax 615.898.7734 – Rutherford County – residential fee
 - Electrical Permits 615.355-5704
 - Sign Permits 615.355.5706 \$100.00 + .30 cents per Square Foot of sign
 - Office Trailer or Construction Trailer: 615.355.5704 \$.30 cents/square foot
 - Foundation Permit: 615.355.5704 – Residential: \$55.00, Commercial/Industrial: \$105.00
 - Demolition Permit: 615.532.6828 TN. Div. of Air Pollution Control - Fee: \$105.00
 - Re-inspection Fee: \$35.00 – Must be paid before the next inspection is started.
 - Business License: 615-459-2553
8. **Manual / Map Fees**

- Sign Ordinance Book	\$15.00	<i>Located on internet:</i> www.townofsmyrna.org
- Zoning Ordinance Book	\$30.00	
- Subdivision Regulations	\$30.00	
- Town of Smyrna Zoning Map	\$30.00	



TOWN OF SMYRNA APPLICATION FOR BUILDING PLAN REVIEW

***Preliminary Plan Review Fee due at time of Application (See below) ***

NAME OF SITE: _____
 ADDRESS OF SITE: _____ ESTIMATED CONSTRUCTION COST: \$ _____
 APPLICANT NAME: _____ APPLICANT PHONE: _____
 APPLICANT CONTACT NAME: _____ CONTACT PHONE: _____
 APPLICANT EMAIL: _____

SQUARE FOOTAGE: _____ x .15, - \$100 = _____ = Preliminary Plan Review Fee
 **** \$5000.00 is the maximum & \$100.00 Minimum for Plan Review Fees; Also, for shell permits the fee will be .075 x Square Feet; ****

CONTRACTOR: _____ CONTRACTOR PHONE: _____
 PROPERTY OWNER: _____ OWNER PHONE: _____
 ARCHITECT/ENGINEER: _____ PHONE: _____
 OTHER EMAIL: _____

Please Circle Type of Application:

Foundation Shell Building Build-Out Complete Building Multi-Family Remodel Addition

SIGNATURE OF APPLICANT: _____

DATE: _____

Office use only below line -- Office use only below line -- Office use only below line -- Office use only below line -- Office use only below line

PRELIMINARY PLAN REVIEW FEE	\$ _____	(Code 503)	Date Paid _____	Check # _____
FINAL PLAN REVIEW FEE	\$ _____	(Code 503)	Date Paid _____	Check # _____

STATE FIRE MARSHAL OFFICE APPROVAL REQUIRED: Y _____ N _____ (Letter Received: Y / N)

Civil District: _____ Zone: _____
 Map: _____ FSB: _____ Site Plan / Project Name: _____
 Group: _____ SSB: _____ Date of Site Plan: _____
 Parcel: _____ RSB: _____

Address of Site: _____

Gas: Yes No _____ Stories: _____ Sprinkler Required: Yes No _____

Use Classification: _____ Group: _____ Type Construction: _____

Model Code Edition: 2012IBC 2012IRC 2012IFC _____ Occupant Load: _____

\$ _____	\$ _____	\$ _____	\$ _____
Total Square	Permit Fee	Total Plan Review	Preliminary Plan Review
			Final Plan Review

SIGNATURE OF CODE REP _____

DATE _____



PLAN SUBMITTAL REQUIREMENTS
COMMERCIAL
INDUSTRIAL
MULTI-FAMILY RESIDENTIAL

TOWN OF SMYRNA CODES DEPARTMENT 615-355-5704

Current Codes are: 2012 edition of ICC Building, Fire, Plumbing, Mechanical, Gas, ICC A117.1-2009 Accessibility code, & 2009 Energy Conservation Code

1. Two sets of drawings must be stamped, signed and dated as per Tennessee state law.
2. Architect or Engineer must be licensed in the state of Tennessee.
3. Drawings required:
 - A. Plan showing all code requirements and the application including: Construction type, occupancy type, egress requirements, height and area limitations and handicapped requirements.
 - B. Site plan must be approved by the Smyrna planning commission, can be submitted while waiting for approval.
 - C. Architectural plans, including floor plans, wall sections, roof sections, elevations, details and all other related drawings.
 - D. Structural plans showing all elements, details, and calculations.
 - E. Electrical plans, details and schedules including exit signs and emergency lights.
 - F. Plumbing plans and schedules.
 - G. Heating, air conditioning, and ventilation plans and schedules.
 - H. Fire alarm plans, if applicable.
 - I. Sprinkler plans, if applicable.
 - J. Gas plans and appliance schedule, if applicable.
 - K. Storage plans, if applicable, showing racks, bins, stacks, etc., including layout, separation and height.
 - L. Fire protection systems including exhaust hoods, if applicable.
4. See Fire Safety Plan Submittal Requirements for additional details
5. Engineering certificates on any trusses, beams or other structural items.
6. Separate permits required for signs and construction trailers. Electrical permits must be obtained from Smyrna Building Safety Office (615) 355-5704.



Fire Safety Plan Submittal Requirements

The following items which are applicable to the structure being submitted must be clearly shown on the plans with any required notes and / or details.

1. Plans must meet all requirements of the ICC Fire and Building Codes 2012 edition.
2. Site plans must show all fire hydrants both new and existing.
3. Site plans must show all fire sprinkler connections. These must be a minimum of 30 feet from the structure and a maximum of 100 feet from a fire hydrant.
4. Building plans must show specific use and occupancy with calculations for both occupancy loads and egress requirements.
5. Building plans must show all emergency lights, exit signs, gas equipment and fire extinguisher locations including type and specifications.
6. Where a fire alarm is required, complete plans and equipment specifications must be submitted for approval.
7. Where a fire sprinkler system is required, complete plans, calculations, and materials specifications must be submitted for approval.
8. Where a cooking equipment hood and automatic fire extinguishing system is required, complete plans and specifications must be submitted for approval.
9. All spray booths and related automatic fire extinguishing equipment must be submitted for approval.
10. All flammable or otherwise hazardous gas systems, piping, controls, safety devices, and any other equipment related to these systems must be submitted for approval.
11. All hazardous materials, processes, operations, storage or anything that could possibly create a life safety situation must be shown on plans.
12. Storage occupancies using racks must show on plans, location, spacing, size, height, and materials of which racks are made.
13. Mercantile occupancies must show on plans location of fixtures and hazardous materials such as paints, flammable liquids, pool chemicals, propane cylinders, and any other hazards.
14. Assembly occupancies must show all fixed seating and / or tables with number of seats and aisle spacing.
15. Food service occupancies must show all tables and seating with number of seats and aisle spacing, and all cooking equipment with specifications.

If you have any questions, please call 615-355-5704

TOWN OF SMYRNA

WATER CUSTOMER DATA SHEET

CUSTOMER _____ ADDRESS _____
 BUILDING ADDRESS _____
 SUBDIVISION _____ LOT NO. _____
 TYPE OF OCCUPANCY _____

FIXTURE	FIXTURE VALUE		NO. of FIXTURES	FIXTURE
	60 psi			VALUE
Bath tub	8	X	_____	= _____
Bedpan Washers	10	X	_____	= _____
Bidet	2	X	_____	= _____
Dental Unit	2	X	_____	= _____
Drinking Fountain - Public	2	X	_____	= _____
Kitchen Sink	2.2	X	_____	= _____
Lavatory	1.5	X	_____	= _____
Showerhead (Shower Only)	2.5	X	_____	= _____
Service Sink	4	X	_____	= _____
Toilet - Flush Valve	35	X	_____	= _____
- Tank Type	4	X	_____	= _____
Urinal - Pedestal Flush Valve	35	X	_____	= _____
- Wall Flush Valve	16	X	_____	= _____
Wash Sink (Each Set of Faucets)	4	X	_____	= _____
Dishwasher	2	X	_____	= _____
Washing Machine	6	X	_____	= _____
Hose (50 ft Wash Down) - 1/2 in.	5	X	_____	= _____
- 5/8 in.	9	X	_____	= _____
- 3/4 in.	12	X	_____	= _____
Combined Fixture Value Total				_____

For Smyrna Utilities use only :			
Customer Peak Demand From Fig. 4 - 2 or 4 - 3 x Press Factor		=	_____ gpm
Add Irrigation - _____ Sections x 1.16 or 0.40		=	_____ gpm
. - _____ Hose Bibs x Fixture Value x _____ Press Factor		=	_____ gpm
Added Fixed Load		=	_____ gpm
TOTAL FIXED DEMAND		=	_____ gpm

NOTES:

Meter	Low		Change Over Range (Compound Meters)	High		Head Loss at Maximum Flow (gpm)
	Minimum Flow Rate (gpm)	Normal Flow Rate (gpm)		Normal Flow Rate (gpm)	Maximum Flow Rate (gpm)	
Positive Displacement						
1/2 in.	0.25	1	N/A	7.5	15	15
5/8 in.	0.25	1		10	20	15
3/4 in.	0.5	2		15	30	15
1 in.	0.75	3		25	50	15
1 1/2 in.	1.5	5	N/A	50	100	15
2 in.	2	8		80	160	15
Multijet						
5/8 in.	0.25	1	N/A	10	20	15
3/4 in.	0.5	2		15	30	15
1 in.	0.75	3		25	50	15
1 1/2 in.	1.5	5		50	100	15
2 in.	2	8		80	160	15
Turbine class 1						
3/4 in.	1.5	N/A	N/A	20	30	15
1 in.	2			35	50	15
1 1/2 in.	3			65	100	15
2 in.	4			100	160	15
3 in.	6			220	350	15
4 in.	8			420	630	15
6 in.	15			865	1300	15
Turbine class 2						
1 1/2 in.	4	N/A	N/A	80	120	7
2 in.	4			100	160	7
3 in.	8			240	350	7
4 in.	15			420	630	7
6 in.	30			920	1400	7
8 in.	50			1600	2400	7
10 in.	75			2500	3800	7
12 in.	120			3300	5000	7
14 in.	150			5200	7500	7
16 in.	200			6500	10000	7
18 in.	250			8500	12500	7
20 in.	300			10000	15000	7
Compound						
2 in.	0.25	2	20	80	160	20
3 in.	0.5	4	23	160	320	20
4 in.	0.75	6	28	250	500	20
6 in.	1.5	10	32	500	1000	20
8 in.	2	16	50	800	1600	20
Singlejet						
1 1/2 in.	0.5	1.5	N/A	50	100	15
2 in.	0.5	2		80	160	15
3 in.	0.5	2.5		160	320	15
4 in.	0.75	3		250	500	15
6 in.	1.5	4		500	1000	15

**TOWN OF SMYRNA
APPLICATION FOR GRADING/EXCAVATION PERMIT**



Applicant Information

Name: _____ Phone: _____
Street address: _____
City, state, zip: _____
Email address: _____

Developer/Owner Information (If different from applicant)

Name: _____ Phone: _____
Street address: _____
City, state, zip: _____
Email address: _____

Location of grading/excavating (by lot, block, tract, and house and street address, or similar description that will readily identify and definitely locate the proposed building or work): _____

Purpose of grading/excavating: _____

Estimated cut & fill: _____ cubic yards. Grading/Excavating permit fee: \$ _____
Number of acres: _____ Storm water fee: \$ _____

Project name: _____

Project address: _____

Location: District _____ Map _____ Group _____ Parcel _____ Zone _____ Setbacks _____

Contractor/Person Performing Grading/Excavating

Name: _____ Phone: _____
Street address: _____
City, state, zip: _____
Email address: _____

Prior to issuance of grading/excavating permit, an inspection must be completed by the storm water management program to insure compliance with §12-304(f) of the storm water management ordinance. The following information must be attached with this application when submitted for approval:

1. Tennessee Contractors License.
2. Workman's Compensation Insurance Certificate.
3. Four sets of Plans showing all specifics of the grading/excavation, including location, size, materials, etc., and supporting data consisting of a soil engineering report and engineering geology report. The plans and specifications shall be prepared and signed by a civil engineer and must comply with §12-305 of the Smyrna Municipal Code.

I have received and reviewed a copy of Smyrna Municipal Code Title 12, Chapter 3 related to grading and excavation, as well as Smyrna Municipal Code Title 14, Chapter 6 related to storm water management.

I hereby agree to comply with all of the applicable provisions of the Smyrna Municipal Code related to grading, excavation, and storm water management, as well as all other applicable federal and state laws, and local ordinances.

I hereby certify that I have read and examined this application and understand and agree that any error, misstatement or misrepresentation of fact, either with or without intention on my part, such as might, if known, cause a refusal of this approval, may constitute sufficient grounds for the revocation of such approval. I further understand that all provisions, laws and ordinances governing this type of work will be complied with at all times, whether specified herein or not. Failure to do so may constitute sufficient grounds for revocation of such approval, the issuance of a stop work order, and/or citation to municipal court or other available legal remedies.

Applicant/Permittee Signature*: _____ Date: _____

**If the applicant is the authorized agent of the permittee, the applicant may be required to submit evidence to indicate such authority.*

(FOR OFFICE USE ONLY)

<input type="checkbox"/> Approval by Planning Commission (The director of public works may at his discretion require approval by the planning commission prior to issuance of a grading permit.) <input type="checkbox"/> Not applicable	Date: _____
<input type="checkbox"/> Plans reviewed by Director of Public Works or Designee	Date: _____
<input type="checkbox"/> Pre-issuance storm water management inspection <ul style="list-style-type: none"> <input type="checkbox"/> Approved <input type="checkbox"/> Denied, the following corrective action is needed: _____ _____ _____ _____ _____ <input type="checkbox"/> Approved with corrective action completed 	Approval Date: _____ Denial Date: _____ Approval Date: _____
<input type="checkbox"/> Development Agreement has been fully executed and is on file.	Date: _____
<input type="checkbox"/> Fees: Application Fees \$ _____ Engineering Review Fees \$ _____ Permit Fee \$ _____ Storm Water Fee \$ _____	Date paid: _____ Date paid: _____ Date paid: _____ Date paid: _____