



Town of Atoka
PH: (901) 837-5300 / FAX: (901) 837-0028
www.townofatoka.com

Application for Accessory Structure

(2018) International Building Code Series is enforced)

PROPERTY INFORMATION

Property Owner Name: _____ Contact Number: _____
Address: _____ City: _____ St: _____ Zip: _____
Map & Parcel: _____ Zoning District: _____ (SN8, SN10, MR, NC, HC, ATC, I, FAR)

CONTRACTOR INFORMATION – (If applicable)

Name: _____ Contact Number: _____
Address: _____ City: _____ St: _____ Zip: _____
Contractor's License #: _____

BUILDING INFORMATION

Building Material: Wood: _____ Metal: _____ Plastic: _____ Vinyl Siding: _____ Other: _____
Construction: Prebuilt _____ Built on location _____
Length: _____ Width: _____ Height: _____ # of Stories: _____

Foundation Type: Slab _____ Wood Frame _____ Wood Skid _____

Will you be installing: Plumbing Yes ___ No ___ / Electrical Yes ___ No ___ (If yes, provide electrical permit number _____)

REQUIRED AT SUBMISSION

- _____ Site Plan for Shed (location, dimensions, distance to property lines, easements, and street, residence)
- _____ Submission of stormwater management plan designed by a professional engineer
- _____ Detailed plan if built on location

Estimated Project Cost of Improvement: \$ _____

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and understand and assume responsibility for the establishment of the official property lines for required setbacks prior to start of construction and agree to conform to all applicable laws of this jurisdiction. I further certify that this information given is true and correct to the best of my knowledge.

Applicant Signature: _____ Date: _____

Municipal / Inspector Use

Zoning Code: _____ Building Code: _____

Flood Plain: _____ Yes _____ No

Stormwater Required: _____ Yes _____ No

Septic Upgrade Require _____ Yes _____ No

Building Plan Review: Approved _____ Not App'd _____ Date _____ Code Official: _____

Codes Administrator: Approved _____ Not App'd _____ Date _____ Code Official: _____

Zoning Plan Review: Approved _____ Not App'd _____ Date _____ Code Official: _____

Special Notes: _____

Project Dimension: L _____ x W _____ x H _____
Total Project Area in Sq Ft _____

Total land disturbed _____

Measurements: Show lot lines, easements, all proposed or existing structures, streets/roads/driveways, waterlines/wells, sewer lines/septic systems, all property lines, all distance of proposed structure(s) from lot lines and work layout and dimensions. Any omitted information may cause a delay in permit issuance.

Note: Plot plan must be included with the permit application.

A large grid for drawing a plot plan. The grid is approximately 30 units wide and 40 units high. At the top of the grid, there are three vertical tick marks that divide the width into three sections. The grid is intended for a plot plan showing lot lines, easements, structures, and other site details.

Accessory Structure & Pole Building (Must comply with the building codes and inspections)

** It is the property's owner's responsibility to know where their property lines and easement areas are located and install the buildings accordingly. **

Inspections required for all accessory structures

1. Footer Inspection
2. Foundation Inspection
3. Plumbing (if applicable)
4. Framing
5. Sheathing (if other than metal)
6. Insulation (if applicable)
7. Electric Rough-in Inspection by State Inspector (if applicable)
8. Stormwater Inspection
9. Final Inspection- Use and Occupancy

All Residential Districts –

- Building shall be no less than 5 feet from principal building
- Structures cannot encroach into any easement or right of way areas
- No building is permitted within a roadway or driveway clear site triangle
- Structure can be no higher than the existing structure
- All accessory structures cannot exceed 1/3 of total back yard

Please call 24 hours in advance to schedule inspections.

Office Hours: 8:00 – 5:00 pm

901-837-5300