Residential Permit Application

Phone: (803) 909-7200 · Fax: (803) 909-7227

Address of Construction _____

City _____ State _____ Zip _____ _____

Subdivision _____ Lot # _____ Map # _____

Is this a corner lot? _____ Driveway entry street _____

Other Structures on property _____

Permit Issued To _____

Address _____

City _____ State _____ Zip _____

Office Phone # _____ Cell Phone # _____

Builder's License # _____ Email address _____

Type Of Permit

Building _____

Demo _____

DHEC Only _____

Zoning Only _____

Gas _____

Mechanical_____

Electrical_____

Job Cost $ _____

Property Owner's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

_____

Description of Work _____ Number of Stories _____

Heated s/f _____ Porch/ Deck s/f _____ Storage/ Barn s/f _____

Garage s/f _____ Is Garage Attached? Yes_____ No _____ Is Garage 2 Stories? Yes_____ NO _____

Basement s/f _____ Basement is finished _____ unfinished _____

Bonus Room s/f _____ Bonus Room is finished _____unfinished _____

Water Provider _____ Electrical Provider _____

Sewer Provider _____ Gas Provider _____

******Acknowledgement of SC 6-29-1145****** Is this parcel of land restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity that is being applied for?_____

******Acknowledgement of Asbestos Regulations****** Federal and State Asbestos regulations require responsible parties to have a DHEC licensed building inspector inspect regulated structures for the presence of asbestos and to obtain DHEC required asbestos project licenses. **Please ensure that these requirements are met prior to conducting any abatement, renovation or demolition activities.** Contact the DHEC Asbestos Section at (803) 898-4289 if you have any questions regarding these requirements. Please sign to acknowledge these requirements. _____

_____ _____ _____

Print Applicant/Agent Name Applicant/ Agent Signature Date

Property Owner(s)

_____ _____ _____

Print Property Owner Name Property Owner Signature Date

OFFICE USE ONLY	**OFFICE USE ONLY**
Zoning Permit # _____	Building Permit # _____
Zoning Permit $ _____	Building Permit $ _____