



Planning and Development
BUILDING PERMIT APPLICATION

PROPERTY ADDRESS: _____

PROPERTY OWNER INFORMATION

NAME:	
PHONE NUMBER:	
EMAIL:	

CONTRACTOR INFORMATION

NAME:	
PHONE NUMBER:	
EMAIL:	
SC LICENSE #:	

PROJECT/WORK DESCRIPTION

CHECK ONE: RESIDENTIAL COMMERCIAL

CHECK ONE: NEW CONSTRUCTION ADDITION REPAIR/RENOVATION

ACTUAL PROJECT COST: _____

EXTERIOR: BRICK VINYL BLOCK PRE-CAST OTHER: _____

TOTAL SQ FT: _____ FOUNDATION: SLAB CRAWL SPACE

BASEMENT: YES NO FLOOD AREA: YES NO

JOB DESCRIPTION: _____

*****ALL INSPECTIONS REQUIRE 48-HOUR NOTICE*****

BY SIGNING BELOW, I HEREBY CERTIFY THAT THE INFORMATION GIVEN HEREIN IS CORRECT AND TRUE. I UNDERSTAND THAT ALL PERMITS NEED TO REMAIN ON-SITE DURING THE ENTIRE DURATION OF THE COMPLETION OF THE PROJECT. I UNDERSTAND THAT THERE WILL BE ADDITIONAL FEES FOR ANY REINSPECTIONS NEEDED:

APPLICANT'S SIGNATURE: _____

DATE: _____