Residential Construction Permit Application Form

PROJECT LOCATION	E-911 Street Address	TMS#
	Subdivision Name	Legal Lot #
	*Current Owner of Real Estate	

Directions to Job Site From Anderson County Building & Codes Office.

_____

_____

PROJECT DESCRIPTION

Plans are required to be submitted for: All Multi-Family Dwellings including: Townhomes and Duplexes, Pre-Engineered/Conventional Steel Metal Buildings

☐ Single-Family Dwelling
☐ Townhouse
☐ Duplex
☐ Detached Garage
☐ Storage Building

☐ Addition
☐ Electrical
☐ Mechanical
☐ Plumbing
☐ Remodel

☐ Demolition
☐ Exterior Deck
☐ Sprinkler System
☐ Mobile Home
☐ Other

Work Description: _____

Framing Type: ☐ Wood ☐ Metal ☐ Concrete ☐ Other: _____

Exterior Finish: ☐ Brick ☐ Vinyl ☐ Wood ☐ Other: _____

Number of Units _____

Total Number of Rooms ***(Excludes Bathrooms)*** _____

Number of Bedrooms _____

Number of Full Baths _____

Number of Half Baths _____

Number of Fireplaces ***(Not Inserts)*** _____

Number of Plumbing Fixtures

____ Toilets	____ Bathtub
____ Lavatory	____ Shower
____ Kitchen Sink/Disposal	____ Dishwasher
____ Clothes Washer	____ Water Heater
____ Utility Sink	____ Bar Sink
____ Other	

Total Number of Plumbing Fixtures _____

Type of Heating/Cooling Equipment

☐ Heat Pump	☐ Electric
☐ Forced Air	☐ Gas
	☐ Oil ☐ Wood
☐ Other: _____	☐ Other: _____

Power Company: _____

Structure Size	Heated (sf)	Unheated (sf)
Basement		
1st Floor		
2nd Floor		
3rd Floor		
Bonus Room Finished: ☐ **Yes** or ☐ **No**		
Garage		
Other: _____		
Total Area =		
Exterior Deck		

CONSTRUCTION VALUATION (Building permit valuation shall include the total value of the work including all material and labor.)	**Cost ($)**
1. Building and Site Preparation =	
2. Electrical =	
3. Mechanical =	
4. Plumbing =	
Total Valuation (Includes Numbers 1 through 4 above) =	

West Pelzer Business License Number			Sewer Impact Required: (Y/N)	

Builder/Contractor:	
Address:	
On Site Contact:	
Phone:	License Number:

Mechanical Contractor:	
Address:	
On Site Contact:	
Phone:	License Number:

Electrical Contractor:	
Address:	
On Site Contact:	
Phone:	License Number:

Plumbing Contractor:	
Address:	
On Site Contact:	
Phone:	License Number:

All building permits require a licensed builder except when the project is being constructed by the owner/builder. **All Builders, including all Sub-contractors, must provide a copy of their South Carolina License and Town of West Pelzer Business License** before a permit will be issued. The applicant hereby certifies that: 1) He/She is authorized to make this application; 2) That he/she has read the above information and it is true and correct; 3) That he/she will comply with all adopted Ordinances and codes, all State and Federal Laws and regulations; 4) That he/she grants the right of entry to the property to the Town of West Pelzer employees for the purpose of inspections and posting of notices. If any of the information provided by the owner or owner's agent is incorrect, the permit may be revoked.

Signature of Owner or Authorized Agent		Date
Print Name		

SCHEDULE FOR BEGINNING WORK:

1. Submit Building Permit Application to the Town of West Pelzer via email at ppayton@westpelzer.com or in person at 30 Main Street, Pelzer SC 29669.
2. It is the permit holder's responsibility to schedule all inspections at least two (2) business days in advance. To schedule inspections, contact Scott McDaniel at 843-729-2452 or email at smcdaniel@safebuilt.com.
3. Permit fees are invoiced direct from SafeBuilt. Coordination of all permit fees, payment, etc. is the responsibility of the permit holder.

Business License Application

Resident: ☐ **Non-Resident:** ☐ **Contractor:** ☐

Date: _____

Business/Company Name: _____
Mailing Address: _____
City: _____ **State:** _____ **Zip:** _____
Physical Address: _____
City: _____ **State:** _____ **Zip:** _____
Phone: _____ **Fax:** _____
FEI: _____ **SS#:** _____
Contact Person: _____ **Title:** _____
Type of Work: _____

I do solemnly swear that the gross sales, receipts, premiums derived from said business for _____ months for last year amounted to $_____

Total license fee according to fee schedule: $ _____

APPLICATION MUST BE FILLED OUT COMPLETELY AND ACCURATELY BEFORE A LICENSE CAN BE ISSUED.

TOWN OF WEST PELZER

BUSINESS LICENSE FEE SCHEDULE
License Year May 31 – May 31

A. **Resident Business:** having permanent place of business within the Town. License is valid for the license year during which it is applied for.
Minimum of first $2,000 gross income ……... $100.00
Per $1,000 or fraction over $2,000 gross income …… $1.00

B. **Non-Resident Business:** no permanent place of business within the Town. License is valid for the job in which is it applied for. Additional work inside the Town limits will require an additional license, however non-resident businesses will only pay ONE minimum per license year.
Minimum on first $2,000 gross income …….. $100.00
Per $1,000 or fraction over $2,000 gross income …… $1.00

Applications must be filled out completely and accurately and all fees paid in full before a license can be issued. Licenses are not transferable. Licenses are revocable at the will of Council.