



Code Compliance Division

Annette Padgett
Permit Center Supervisor
apadgett@greenvillecounty.org
www.greenvillecounty.org

Permit Refund Policy

A full refund (minus a \$30.00 administrative fee) may be granted on applications that have not had any inspections and have not expired.

The customer must provide a copy of the application receipt and or show legitimacy that the refund can be approved.

A refund for septic may be granted (minus \$30.00 administrative fee) only with the approval of the Health Department. DHEC shall provide a release in writing to be scanned with the paperwork as permanent document. The Permit Tech may begin the process with a verbal from the Health Department knowing that the paperwork is on the way. The Permit Tech may retrieve a copy of the septic or permit receipt from the scanned docs.

The Permit Technician will complete a Refund Request form to be submitted to the department Permit Center Supervisor. The Permit Technician will make notes into the permit concerning the refund and close the permit. If it is a septic permit refund make notes in the HTE land file concerning the refund.

Any future permits will require a new application.

The Permit Center Supervisor will mail the check directly to the address provided on the Refund Request form.

11-13-2019



Code Compliance
864-467-7060

DO NOT MAIL CHECK

Attention: Sheila Fralin, Accounts Payable

Date: _____

From: _____

Refund Amount Requested: \$ _____

<u>ORG</u>	<u>OBJ</u>	<u>PROJECT</u>	<u>DESCRIPTION</u>	<u>AMOUNT</u>
1000	400120		CONSTRUCTION PERMITS	\$
1000	400880		DHEC REVENUE @ \$12.50 (County Septic Tank)	\$
100006	202110		DHEC DUE TO STATE (State Septic Tank)	\$
1000	400710		EROSION-COUNTY- 25% (Grading County)	\$
1000	400720		GRADING FEES (Grading State)	\$
1000	401050		ENCROACHMENT FEE	\$
20ENGINR	408820	O1EFM	ENCROACHMENT FEES-SIDEWALK	\$
1000	400640		SIGN STORAGE	\$
1000	400900		BILLBOARD RENEWAL	\$
1000	400140		ZONING BOARD OF APPEALS	\$
1000	400510		PLANNING COMMISSION (Planning)	\$

Receipt Date & No.: _____

Receipt For: _____

Reason for Refund: _____

Refund to: _____

Receipt Amount: \$ _____

Less \$15 Administrative Fee \$ _____

TOTAL REFUND DUE: \$ _____