

Greenville County

Greenville County Square
301 University Ridge, Suite 4100, Greenville SC 29601-3686
Phone (864) 467-7060 Fax (864) 467-7407
permits@greenvillecounty.org

NEW RESIDENTIAL CONSTRUCTION APPLICATION

APPLICATION MUST BE COMPLETED PRIOR TO REQUESTING PERMIT

Date: _____ Property Owner's Name: _____ Phone No: _____
Exact Address of Property: _____ City: _____ State/Zip: _____
Subdivision Name: _____ Lot No: _____ Tax Map No: _____ Mobile No: _____
Sq. Ft. of House: _____ Sq. Ft. of Basement Heated: _____ Sq. Ft. of Basement Unheated: _____
Sq. Ft. of Attached Garage: _____ Total Sq. Ftg. _____
Total No. of Rooms _____ No. of Stories _____ No. of Bedrooms _____ No. of Baths _____
This Permit is for a: Single Family Dwelling _____ Duplex _____ Modular _____ State Compliance # _____
Is this a Corner Lot: _____ If yes-you must submit the E911 address form with the application. 864 467-5914

CONTRACTOR *faxing application, also fax a copy of the contractor's license*

Name: _____ Co. Name: _____ License No: _____ Exp. Date: _____
Mailing Address: _____ City: _____ State/Zip: _____
Phone No: _____ Mobile No: _____ Fax No: _____
Email: _____

ELECTRICAL CONTRACTOR

Name: _____ Co. Name: _____ License No: _____ Exp. Date: _____
Mailing Address: _____ City: _____ State/Zip: _____
Phone No: _____ Mobile No: _____
No. of Amps: _____ No. of Breakers: _____ Name of Power Company: _____

MECHANICAL CONTRACTOR

Name: _____ Co. Name: _____ License No: _____ Exp. Date: _____
Mailing Address: _____ City: _____ State/Zip: _____
Phone No: _____ Mobile No: _____
No. of Heating Units of each type: Propane _____ Gas Pack _____ Gas Furnace _____ Heat Pump _____ Wood _____
No. of Water Heaters of each type: Gas _____ Electric _____ Name of Gas Company: _____
No. of Gas Appliances: Gas Logs _____ Gas Grill _____ Gas Stove _____ other, give description _____
No. of Fireplaces: Brick _____ Prefab _____ Check here if gas line goes to a Brick Fireplace.

PLUMBING CONTRACTOR

Name: _____ Co. Name: _____ License No: _____ Exp. Date: _____
Mailing Address: _____ City: _____ State/Zip: _____
Phone No: _____ Mobile No: _____
No. of Plumbing Fixtures: _____ (Including but not limited to: kitchen sink, dishwasher, garbage disposal, hot water heater, washer, laundry sink, all bathroom fixtures) Septic Tank _____ OR Sewer _____

EXACT DIRECTIONS TO JOB SITE (from a main road): _____

For information regarding culverts, driveways, or encroachment permits, contact 467-7016 if the property is on a county road or 241-1224 if the property is on a state road.

The applicant hereby certifies and agrees as follows: 1) That 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 County of Greenville ordinances, laws and regulations, all State and Federal Laws and regulations regulating the use of land and structures and the construction of structures; 4) That he/she will perform only the work outlined above at the property indicated above; 5) That he/she grants the right of entry to the property to the Building Official or employees of the County of Greenville for the purpose of inspections, and posting of notices. If any of the information supplied by the owner and/or owner's agent is incorrect, the permit may be revoked.

THIS PERMIT WILL BECOME INVALID WITHIN 6 MONTHS FROM DATE OF ISSUE IF: WORK HAS NOT COMMENCED, IF AN INSPECTION HAS NOT BEEN REQUESTED, OR IF WORK HAS BEEN SUSPENDED FOR A PERIOD OF 6 MONTHS.

This permit is permission to proceed with construction and shall not be construed as authority to violate, alter or set aside any of the provisions of the Building Code and any other applicable laws or ordinances, nor shall the issuance of this permit prevent the Building Official from requiring correction of errors in construction documents or of violations of the Building Code of the County of Greenville, South Carolina.

DATE: _____ BY OWNER OR AUTHORIZED AGENT: _____

PRINT NAME: _____

Cost of Permit: \$ _____

Greenville County

Greenville County Square
301 University Ridge, Suite 4100, Greenville SC 29601-3686
Phone (864) 467-7425 Fax (864) 467-7407
permits@greenvillecounty.org

RESIDENTIAL ZONING APPLICATION

APPLICATION MUST BE COMPLETED PRIOR TO REQUESTING PERMIT

| | | | | | | |
|----------------------------|------|-----------|----------------------|----------------|--|--|
| Property Owner's Name: | | | | Phone No.: | | |
| Exact Address of Property: | | | | City: | | |
| Tax Map No.: | | | Email: | | | |
| This application is for: | New; | Addition; | Accessory Structure; | Swimming Pool; | | |

IF PROPERTY IS IN A ZONED AREA OF THE COUNTY,
ZONING WILL BE VERIFIED AND ALL REQUIREMENTS MUST COMPLY WITH THE ZONING ORDINANCE.

IF PROPERTY IS IN A UNZONED AREA OF THE COUNTY,
SETBACKS WILL BE VERIFIED BY THE BUILDING DEPARTMENT AND MUST COMPLY WITH THE LAND DEVELOPMENT REGULATIONS ORDINANCE

Setback distances cited below are those minimums established by Greenville County Zoning Ordinance/Land Development Regulations. Please be aware that properties may be subject to private deed restrictions and covenants in excess of those shown on this approval

The applicant hereby certifies and agrees as follows: 1) That 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 County of Greenville ordinances, laws and regulations, all State and Federal Laws and regulations regulating the use of land and structures and the construction of structures; 4) That he/she will perform only the work outlined above at the property indicated above; 5) That he/she grants the right of entry to the property to the Building Official or employees of the County of Greenville for the purpose of inspections, and posting of notices. If any of the information supplied by the owner and/or owner's agent is incorrect, the Permit/Certificate may be revoked.

This Application is permission to proceed with the project in accordance with the Zoning Ordinance and shall not be construed as authority to violate, alter or set aside any of the provisions of the Building Code and any other applicable laws or ordinances, nor shall the issuance of this permit prevent the Building Official or Zoning Administrator from requiring correction of errors in project documents or of violations of the Building Code or Zoning Ordinance of the County of Greenville, South Carolina.

Any information and documents submitted to the County of Greenville, for the purpose of Construction Document review and approval, becomes subject to the South Carolina Freedom of Information Act (SC Code of Laws, 1976 as amended, Title 30, Chapter 4) and may be subject to public inspection and review.

DATE: _____ BY OWNER OR AUTHORIZED AGENT: _____

THIS AREA IS FOR OFFICE STAFF ONLY- DO NOT WRITE BELOW THIS LINE

| |
|--|
| Zoning District: _____ Setbacks: Front _____' Rear _____' Left Side _____' Right Side _____' |
|--|

DATE: _____ APPROVAL OF ZONING / BUILDING OFFICIAL: _____

Permit No: _____

NOTES: _____



Grading/Erosion Control Acknowledgement Single Family Residential Construction

Site Location Address: _____

Tax Parcel Number: _____

Subdivision Name: _____ Lot #: _____

Owner, Builder or General Contractor (please initial each section):

- I certify that I have been given a copy of the *Single Family Residential Erosion/Sediment Control Standards* booklet or that I will use the link below to print out and reference these standards. I understand and agree to implement required erosion control measures outlined in booklet.
<https://greenvillecounty.org/LandDevelopment/pdf/ErosionSedimentContolStandard.pdf>
- I certify that I will follow the Stormwater Pollution Prevention Plan (SWPPP) for the subdivision or comply with requirements outlines in the *Single Family Residential Erosion/Sediment Control Standards*
- I understand that if I have a live stream/creek on my property that I will have to provide documentation form the US Army Corps of engineers or I will provide an undisturbed 100' buffer.
- I am responsible for implementing, maintaining and monitoring effectiveness of the SWPPP during construction on the lot(s) listed above
- I understand that I may need to supplement or modify implemented protection measures as site conditions develop to control on-site erosion and ensure all site runoff is adequately treated by stormwater controls
- I am responsible for actions of all subcontractors and delivery personnel at the worksite as they related to the SWPPP and *Single Family Residential Erosion/Sediment Control Standards*
- I understand that if this lot is part of a larger common plan of development without developer-provided NOI coverage, I must apply for Individual Lot (IL)-NOI coverage as required by SC DHEC (Stormwater Permitting-2600 Bull St. Columbia SC 29201). Or, if I am disturbing over 1 acre of land that is not part of a larger common plan of development, I will obtain a land disturbance permit from Land Development Division (301 University Ridge, Suite 3900 Greenville SC 29601)
- I acknowledge that non-compliance of *Single Family Residential Erosion/Sediment Control Standards* will result in Notice of Violations and/or Stop Work Orders. Non-compliant may also lead to permit suspension, revocations, penalty fees, and civil penalties starting at \$1,000.00 per day.

Company Name or Property Owner (please print)

Street Address

City State Zip Code

Telephone Fax

Contact Name (If owner is company-please print)

Signature

Building Permit Number: _____

Issued By: _____ Date: _____

Jurisdiction: Unincorporated Fountain Inn Mauldin Simpsonville Travelers Rest

For more information visit www.scdhec.gov/stormwater

Original Copy: Codes Enforcement
Carbon Copy: Property Owner