PERMIT AGENT AUTHORIZATION

Commercial Projects

GREENVILLE COUNTY

Greenville County Square 301 University Ridge, S-3100 Greenville, SC 29601-3686 Phone: (864) 467-7060

Select: \Box SC Licensed General Contractor, \Box SC Licensed Sub Contractor, \Box Owner			Date
SC State License Number: SC State License	te License Number: SC State License Type:		
Name (As Listed with LLR):			
Address	City	State	Zip
Phone Number	Email		

Authorization

I hereby authorize the following, listed below, to act as my agent in obtaining Permits for:

Application /	Permit	Number: _
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Address: _____

Authorized Agents

A PICTURE ID MAY BE REQUIRED TO BE PRESENTED AT THE TIME THE LISTED AUTHORIZED AGENT SECURES THE PERMIT.

SC General Contractor Name (Print):

Other Agent Name (Print):

Other Agent Name (Print):

Other Agent Name (Print):

Other Agent Name (Print):

THIS LETTER SUPERSEDES ANY PREVIOUSLY SUBMITTED LETTER(S) OF AUTHORIZATION. This letter must contain only the people you want to pull permits in your name. To make changes to the letter, you must submit a new letter. This authorization is to remain in effect, unless canceled in writing by the undersigned.

Date
Permit Version
1996 – Rev 02-27-2024

This form s	hall be notarized pri	ior to submittal:
Sworn to a	and subscribed be	efore me
This	Day of	, 20

Notary Public of South Carolina	
My Commission Expires	