

Cost of project: \_\_\_\_\_

Project Start Date: \_\_\_\_\_

Project End Date: \_\_\_\_\_

## COMMERCIAL BUILDING PERMIT APPLICATION

All applicable blanks must be completed before a building permit can be issued.

TODAY'S DATE:

## **Company Information that is perfoming the work**

Company Name:			
Owner's Name:			
Mailing Address:			
Street Address (if different f	rom mailing):		
City, State, Zip Code:			
Telephone Number: ()	Em	ail Address:	
SC Contractor's License #:			Exp. Date:
City of Hartsville Business I			Exp. Date:
Home Owner Information	(where work is bein	g performed)	
Home Owner's Name:			
Address:			
City, State, Zip Code:			
NATURE OF WORK: circle one □ New Building □ Mechanical			tage:
□ Addition	□ Gas	Occupancy Type:	
<ul><li>Electrical</li><li>Plumbing</li><li>Description of work being p</li></ul>	$\square$ Renovation	<mark>**Tax Map</mark>	#:

I certify that the information stated on the subcontractors list is accurate and that all work will be performed by State licensed and local licensed contractors.

- 1. WORK THAT REQUIRES A BUILDING PERMIT CAN NOT START UNTIL PERMIT CARD IS POSTED IN A VISIBILE LOCATION.
- 2. PERMIT IS VOID IF WORK IS NOT STARTED IN SIX (6) MONTHS FROM ISSUANCE.
- 3. ALL BUILDING CODES MUST BE FOLLOWED AT ALL TIMES. INSPECTIONS MUST BE CALLED FOR BEFORE MOVING TO NEXT PROJECT.
- 4. USING UNLICENSED SUBCONTRACTORS MAY PREVENT YOU FROM BEING ELIGIBLE FOR INSPECTIONS AND OR A CERTIFICATE OF OCCUPANCY.

Signature of Contractor

Date