



# County of Greenville

" . . . At Your Service "

**Greenville County Square**  
**301 University Ridge, Suite 4100**  
**Greenville SC 29601-3660**  
**Phone (864) 467-7060 Fax (864) 467-7407**

## 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: \_\_\_\_\_ 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 \_\_\_\_\_ Is this a Corner Lot: \_\_\_\_\_  
Road Information: Private Road  Public Road  County Road  State Road

### 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: \_\_\_\_\_

### ELECTRICAL CONTRACTOR

Name: \_\_\_\_\_ Co. Name: \_\_\_\_\_ License No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Phone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_ Fax 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: \_\_\_\_\_ Fax No: \_\_\_\_\_  
No. of Heating Units of each type: Gas \_\_\_\_\_ Propane \_\_\_\_\_ Heat Pump \_\_\_\_\_ Wood \_\_\_\_\_  
No. of Water Heaters of each type: Gas \_\_\_\_\_ Electric \_\_\_\_\_ Name of Gas Company: \_\_\_\_\_  
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: \_\_\_\_\_ Fax 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: \_\_\_\_\_

Applications must be faxed to the Permit Application Center 48 hours in advance of permit pick up. 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: \_\_\_\_\_

Further Information Needed  Ready for Pickup Permit No: \_\_\_\_\_ Cost of Permit: \$ \_\_\_\_\_



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## Grading/Erosion Control Acknowledgement Single Family Residential Construction

Address: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Subdivision Name: \_\_\_\_\_

**Owner or General Contractor:** I certify that I will:

- (a) Follow the Storm Water Pollution Prevention Plan (SWPPP) for the subdivision. I am responsible for implementing, maintaining and monitoring effectiveness of the SWPPP during construction on the lot(s) listed above, or
- (b) Comply with the requirements outlined in the "Single Family Residential Erosion/Sediment Control Standards". I understand and agree to implement required erosion and sediment control measures described in the "Single Family Residential Construction Erosion/Sediment Control Standards." I further understand that if I am disturbing over 1 acre of land and not part of a larger common development I will obtain a land disturbance permit in Suite 3900.

I also 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 storm water controls. I will also be responsible for actions of all subcontractors and delivery personnel at the worksite as they relate to the SWPPP and "Single Family Residential Construction Erosion/Sediment Control Standards."

\_\_\_\_\_  
Company Name or Property Owner

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Contact Name (Printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Building Permit Number: \_\_\_\_\_

Issued By: \_\_\_\_\_