

PERMIT AGENT AUTHORIZATION

GREENVILLE COUNTY

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



*If work performed by Contractor , provide Name and Sign at the bottom			Date
*If No Contractor , provide Property Owner Name and Sign at the bottom			Date
Address	City	State	Zip
Phone Number	Email		

Authorization

I, _____, _____, _____,
(Contractor's Name as listed with SC LLR) (SC State License Number) (SC State License Type)

OR

I, _____,
(Property Owner)

hereby authorize the following to act as my agent in obtaining Permits in:

Multiple Locations within Greenville County.

OR

Only for property located at _____.

Authorized Agents

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

Agent Name

Agent Name

Agent Name

Agent Name

Agent Name

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.

*Signature	Date
Print Name	Permit Version 10.18.2017-JH03