

**CITY OF ANDERSON BUILDING & CODES**  
**NEW RESIDENTIAL CONSTRUCTION PERMIT APPLICATION**

Municipal Business Center  
601 S. Main Street, Anderson, SC 29624  
864-231-2217 (phone) / 864-225-6617 (fax)

**JOB INFORMATION:**

Date: \_\_\_\_\_ TMS # \_\_\_\_\_  
Address: \_\_\_\_\_ Lot # \_\_\_\_\_  
Owners Name: \_\_\_\_\_ Owner's Phone \_\_\_\_\_  
Owners Address: \_\_\_\_\_  
Name of Architect or Engineer \_\_\_\_\_

**ZONING:**

Current Zoning: \_\_\_\_\_ Historic District: \_\_\_\_\_  
Setbacks: Front \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_  
Corner lot requires two (2) front yard setbacks. (Zoning Approval \_\_\_\_\_)

**BUILDING: NEW RESIDENTIAL SINGLE FAMILY**      **CONTRACT/JOB COST:** \_\_\_\_\_  
**(Contract cost may exclude trade amounts for new single family construction only)**

Use: Single Family \_\_\_\_\_ Dimensions: Sq Ft \_\_\_\_\_ Type of Work: New Building \_\_\_\_\_  
Duplex \_\_\_\_\_ # Stories \_\_\_\_\_ Contract \_\_\_\_\_  
Height \_\_\_\_\_ Spec \_\_\_\_\_

Description of Job/Work:

Square Footage New Structure: \_\_\_\_\_  
New Construction: # Rooms \_\_\_\_\_ #Baths \_\_\_\_\_ #Stories \_\_\_\_\_

**ELECTRICAL:**      **CONTRACT/JOB COST:** \_\_\_\_\_

Commercial \_\_\_\_\_ Residential \_\_\_\_\_  
New Service \_\_\_\_\_ Additional Wiring \_\_\_\_\_ Rewiring \_\_\_\_\_  
Additional Service \_\_\_\_\_ Swimming Pool \_\_\_\_\_ Temporary Pole \_\_\_\_\_

Description of Job/Work:

Building Permit Number (if applicable) \_\_\_\_\_

**PLUMBING:**      **CONTRACT/JOB COST:** \_\_\_\_\_

Commercial \_\_\_\_\_ Residential \_\_\_\_\_ # FIXTURES \_\_\_\_\_

Description of Job/Work:

Building Permit Number (if applicable) \_\_\_\_\_

**MECHANICAL/GAS:**

**CONTRACT/JOB COST:** \_\_\_\_\_

Commercial \_\_\_\_\_ Residential \_\_\_\_\_

New Service \_\_\_\_\_ Alteration \_\_\_\_\_ Addition \_\_\_\_\_ Repair \_\_\_\_\_

Description of Job/Work: \_\_\_\_\_

Building Permit Number (if applicable) \_\_\_\_\_

**MISCELLANEOUS PERMIT: (Demolition, Grading, Moving, Temporary Non-Residential Use)**

Permit Type \_\_\_\_\_ **CONTRACT/JOB COST:** \_\_\_\_\_

Description of Job/Work: \_\_\_\_\_

For Grading Permit, please provide the # of acres \_\_\_\_\_

**RESIDENTIAL PROPERTY OWNER DOING OWN WORK:**

This is to certify that I am the owner and will be the sole occupant of the property for two years after issuance of the Certificate of Occupancy for which this permit application is being made. By signing this application, I am stating that I will be performing this work myself and, therefore, am solely responsible for any and all work that is performed at this address. I also agree to be on the job site at any time that work is being performed and understand that all required inspections are to be properly requested and completed before any work is concealed. All subcontractors used on this project must obtain necessary permits and/or business license. VIOLATION OF ANY PART OF THIS AGREEMENT SHALL VOID ALL PERMITS.

Print Name of Property Owner \_\_\_\_\_ Date \_\_\_\_\_

Sign Name of Property Owner \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

\*\*Is this a rental property? (circle) yes no

\*\*If this is a rental property, South Carolina law states that all work **MUST** be performed by a licensed contractor.

**CONTRACTOR:**

Business Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ Fax \_\_\_\_\_

Email Address \_\_\_\_\_

CITY OF ANDERSON BUSINESS LICENSE # \_\_\_\_\_ EXPIRES \_\_\_\_\_

State License Agency (Please Check One):

South Carolina Contractors Licensing Board \_\_\_\_\_ State License Classification \_\_\_\_\_

South Carolina Residential Builders Commission \_\_\_\_\_ State License Number \_\_\_\_\_

By signing this application, I certify that I am an authorized agent for the company performing the work stated above and that all the information provided is true. I further understand that if any information provided is found to be incomplete, incorrect or falsely stated that this permit will be null and void and that I may be responsible for violation of pertinent related state laws and local ordinances.

Print \_\_\_\_\_

Sign \_\_\_\_\_

Date \_\_\_\_\_

Authorization to Inspect \_\_\_\_\_ (Initial)