

DARLINGTON COUNTY BUILDING /CODES ENFORCEMENT

1 PUBLIC SQUARE ROOM 210, DARLINGTON, SC 29532

102 EXCHANGE STREET, ALLEY ENTRANCE

COMMERCIAL BUILDING APPLICATION

Jurisdiction: [] Darlington [] Hartsville [] Society Hill [] Lamar [] Other

OWNER : _____ DATE: _____

Occupied by: _____

E911 ADDRESS: _____

Tax Map # _____

Power Provider _____

Nature of Work

Type of Occupancy

Have you begun this project? _____

- [] 1. New building
- [] 2. Addition
- [] 3. Alteration
- [] 4. Repair/replacement
- [] 5. Foundation only

- [] 1. ASSEMBLY
- [] 2. BUSINESS
- [] 3. EDUCATIONAL
- [] 4. FACTORY-INDUSTRIAL
- [] 5. HAZARDOUS
- [] 6. INSTITUTIONAL
- [] 7. MERCANTILE
- [] 8. STORAGE

Estimated start date _____
Estimated date of completion _____

TOTAL VALUATION \$ _____

1. No of Stories _____ No of Bathrooms _____ No of Rooms _____ No of Fireplaces _____ No of Accessory Bldg _____

2. Total Floor Area of New Construction based on exterior dimensions _____ Sq ft Heated Area: _____ Sq ft

Floor Area Per Level: 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 _____

3. No. Occupants _____

4. Construction Material Type: [] Frame [] Metal [] Wood [] Other _____

5. Exterior: [] Brick [] Con. Block [] Stone [] Brick Veneer [] Stucco [] Metal [] Wood [] Glass [] Vinyl [] Other _____

6. Type of Fuel: [] Oil [] Natural Gas [] LPG [] Electric _____

Description of work:

1. Work requiring a permit shall not commence until the permit holder or his agent posts the permit card in a conspicuous place on the premises.
2. Permit is void if job is not started in 6 months from date of issuance.
3. The undersigned owner or agent understands that approval of this application does not constitute a privilege to violate any applicable government ordinances, codes or laws, and that any omission of or misrepresentation of fact with or without intention of the undersigned or any alteration or change from this application, shall constitute grounds for the revocation of any permit issued which was based on the approval of this application.

[] Contractor [] Owner _____ Phone _____

Address _____

Signature _____

[] Approved [] Denied Approved By: _____

PAID: [] CASH [] CHECK-CHECK# _____

RECEIVED BY: _____

DATE: _____