

MINOR APPLICATION: NEW BUSINESS

State Farm 429 Red Bank Road Roof

## ARB SCOPE OF WORK FORM/

## APPLICATION / INFORMATION SUMMARY DEPARTMENT OF PLANNING AND ZONING 843-797-6220 EXT. 1118

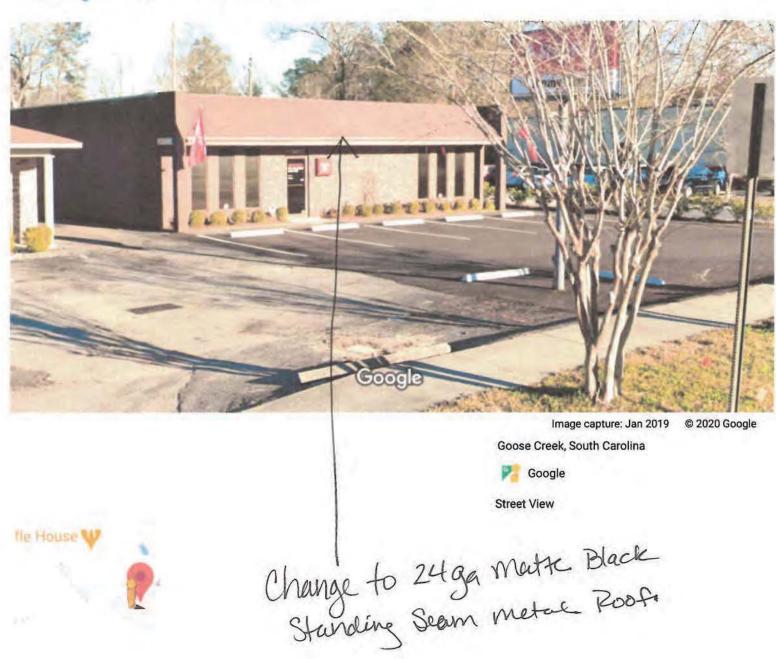
P.O. Drawer 1768

519 N. Goose Creek Blvd. Goose Creek, South Carolina 29445-1768

www.cityofgoosecreek.com

Fax: 843-863-5208

Property Address:	429 Red Bank Rd	TMS No.: 252-01-03-022
Review request:	For:	Preliminary meeting date requested: 11/10
☐ Preliminary	□New Construction	Appeal Decision of Architectural Review Board
<b>Final</b>	☐Color Change ☐ Demolition ☐ Other_	
2		
	Marsh Holdings LLC	Daytime phone:
	Contracting, ice	Daytime phone:
ARB Meeting Representati	ve: Bill Cahill	Contact Information:
Applicant's malling address	25:	
City:		State: Zip: '
Applicant's e-mail address:		
Applicant's relationship:	□Owner □Design Professional ☑	Contractor Real Estate Agent/Broker Othe
White TA	S Used: (specific color(s)/manufacture #'s listed: s (Example: Building Materials, Exterior Col	
White TA	(Example: Building Materials, Exterior Col	
White TA	(Example: Building Materials, Exterior Col	ors, Landscaping, Lighting)
Perneve ex ayea, unstruneve shu	Scope of Work: (please give a de stine Post, install Trail Pretal Standing Sealing and Color of Signature below that the foregoing application is a signature below that the foregoing application is a	etailed description)  O Material On low Pitch room Panels an Front of Roof  Material Sauk.
Pernave ex ayea, unstrunere show	Scope of Work: (please give a de Stine 1806, Install Trail Pretal Standing Sea inglus and curvently color of the subject projection is a signature below that the foregoing application is a signature below the signature below that the foregoing application is a signature below the signature	etailed description)  O Material On low Pitch room Panels an Front of Roof  Material Sauk.



TPO to be installed on low pitch roof area.

Cahell Centracting UC 843-747-5848



429 Red Bank Rd. The panels will look like this. Let me know of you have any questions

Racera franco Caliel Centracting 843-747-5848



MAJOR APPLICATION: NEW BUSINESS

Chase Bank
214 St. James Blvd
Site, Landscaping, Elevations, Materials, Colors

Scope of Work	
New doveno pom location u	with concrete pad, bollards,
Signature cannon Whill he	ight detector bar + pole Virectional amous to be painted.
Light Land Change and o	The alaces of the force
tidened - carr suibilia aler (	MITCHONAL arrows To be printed.
W	
	that is a second of the second
Are there recorded covenants and restrictions for this property (e	ex: HOA) Yes No
Do these covenants and restrictions prohibit any of the features b	eing constructed per this permit? Yes No
Windows -DP Rating:# Windows Replaced:	#Doors Replaced:
Reroof Color and/or Style Change: Yes/No If yes, please explain:	
HVAC Changeout: Yes/No Location of Exterior System:	
Demolition: Yes No If yes, Attach copy of A	sbestos Survey and DHEC Demolition Permit
	Marshall approved plans to this application
The Sprinker System. Tes 10 11 yes, Attach State File	iviaisnan approved plans to this application
DEMOLITION PE	RMIT INFORMATION
ASBESTOS: S.C. DHEC Regulation 61-86.1 states that prior to commencing dem	nolition or major renovations of regulated facilities or structures, contact
the S.C. DHEC Asbestos Section to determine if there are any absbe	estos abatement requirements that would require permitting through their
offices. For more information visit S.C. DHEC at 803-898-4289	
LEAD PAINT:	
Before commencing demolition, contact the Land and Waste Manag disposal requirements for lead contaminate construction waste.	ement of S.C. DHEC 803-896-4203 to determine identification and
I understand and acknowledge this information. Initial:	
Applican	t Certification
A 00 / 01 / 10 10	and that if my scope of work changes in any way after the
submittal and approval of this permit, I must contact the E	Building Permits Department for additional permits. If I perform
work not permitted under this permit or another permit is contruction and all work will cease until proper permits are	issued to me, a stop work order will be placed on the site of obtained. Permit becomes void if work authorized is not begun
and/or completed within six months of the permit issue da	te. I have examined this application and certify it to be true and
correct. I agree the work will be accomplished in accord construction or the performance thereof.	dance with all city, state, and federal codes or laws regulating
7-A	1.1
	10/2/2020
Signature of Contractor/Agent/Owner	Date
Dines	
Uwnen	SUBMIT ►
Title	

OFFICE USE	ONLY
PERMIT #: AMOUNT DUE: \$	
DATE PAID:	

## CITY OF GOOSE CREEK SIGN PERMIT APPLICATION

	Today's Date: November 12020	Permit Fee: \$75.00
1.	Business Owner J. P. Morgan Chase Business Phone	
	Name of Business J. P. MOTE and Chase Alternate Phone	
	Street Address of Business 214 ST. James Ave Goo	OSE Creek SC 29445
	Landlord/Lessor ROIF Shannon PARKUC Landlord's Phone	
	Sign Company Patt SON Sign Group Sign Co. Phone	
	Sign Co, Contact MATK Davey Sign Co. Address 520 W 5	
2.		Total Cost \$ KNOKUL
3.	How many signs are you applying for? DNE How many signs does this	
4.	What kind of signs does this business already have?	None
5.	What type of business is applying for this sign permit:  A. A stand alone business?  B. A part of a shopping center?  Yes \sum No  If yes, shopping center	name: Shahwan Patk
5.	What is the TMS number for this property?	
7.	What is the <u>front</u> setback of the business in feet? 47 (The distance from the front A. For corner lots only, what is the front setback for second street frontage in feet	ont property line to the front of business)
3.	What is the width of the business in feet? 36 4 (The distance from wall to war.)  A. For corner lots only, what is the width of the business for second street frontage.	
	What is the property's road frontage in feet? N/A (This only applies to shopping	g centers erecting a freestanding sign)
0.	Please attach photos showing:	
	A. The storefront in relation to adjacent businesses;	OFFICE USE ONLY
	<ul> <li>B. The specific location of proposed sign(s) on the property or building; and</li> <li>C. The actual sign if it already exists.</li> </ul>	MAX. NO. OF ALLOWED SIGNS:
1.	Please attach drawings of each proposed sign showing (drawn to scale):  A. The completed sign as it will actually appear on the building	MAX ALLOWED SIGN AREA:
	B. All dimensions;	
	C. Where the colors will appear;	
	<ul> <li>D. The location on the property (on a plat) of proposed &amp; existing freestanding signs</li> <li>E. The location on the building of proposed &amp; existing building signs</li> </ul>	gns

- 12. Please attach swatches, samples, and/or paint chips of all proposed colors to the application.
- 13. Please complete the Sign Information Table located on the following page.
- 14. You are required to attend the Architectural Review Board meeting in which your sign application is reviewed.
  - Please submit this application by the 1<sup>st</sup> Monday of the month for consideration that month by the ARB.
  - The ARB meets on the 3<sup>rd</sup> Monday of each month. (Please see attached ARB schedule for application deadlines and meetings.)

NOTE: Illuminated, exposed and non-exposed neon signs located on the interior of a business, which are visible from the exterior of the business, must be reviewed by the ARB. Such signs shall be included as part of a business's maximum allowable square footage of building signage, as authorized in Section 151.084 of the City Code. A "non-exposed neon sign" shall be interpreted as a neon sign that does not have externally visible neon tubing. Neon signs enclosed in plastic, glass and Plexiglas casings are considered "exposed neon signs." All electrical work must be in accordance with the City's Code of Ordinances and the National Electrical Code.

## SIGN INFORMATION TABLE

Required Information	Sign 1 Secstampel Eng. Drawings		Sign 2	Sign 3
Materials: (metal, plastic, wood, etc.)				
Illumination: Exterior, interior or not lighted				
Type of Sign:				
Height (FEET)				
Width (feet)				
Area (square feet)				
All colors used on sign				
Is there a graphic (picture) on the sign? (Y/N) If yes, size of graphic				
Projection from building or cabinet width (thickness)				
Number of styles of lettering				
Height of letters (if channel letters)				
If mounting individual letters, space between letters				
If mounting individual letters, space between words			===40	
If window sign, size of window				
If changeable copy sign (reader board), number of lines				
If freestanding sign, distance between sign and street curb (ft)				
If freestanding sign, total height above grade (ft)				
If freestanding sign, landscaping materials to be planted at base of sign		,		

Kali !	dus	11/11/26
Sign	ature of Applicant	Date
NAME OF THE OWNER OWNER OF THE OWNER OWNE	OFFICE USE ONLY	
emarks:		

Issued by:

Date:

Approval: Zoning Administrator

