



# PERMIT APPLICATION CITY OF GOOSE CREEK, SOUTH CAROLINA

Office Use Only: Permit Numbers

\_\_\_\_\_ X \_\_\_\_\_ E  
\_\_\_\_\_ B \_\_\_\_\_ M  
\_\_\_\_\_ G \_\_\_\_\_ SP  
\_\_\_\_\_ P  
BL# \_\_\_\_\_

Street Address \_\_\_\_\_ Construction Group/Classification \_\_\_\_\_  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Property Owner \_\_\_\_\_ Phone \_\_\_\_\_  
Contractor \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Contractor's State License # \_\_\_\_\_

Scope of Work (Please use reverse side of this form for a detailed description of work) \_\_\_\_\_ over →

Use of Improvement  \_\_\_\_\_

Single Family  Duplex  Apartment  Commercial  Other \_\_\_\_\_

1<sup>st</sup> Floor Heated Sq. Ft. \_\_\_\_\_ 2<sup>nd</sup> Floor Heated Sq. Ft. \_\_\_\_\_ 3<sup>rd</sup> Floor Heated/Unheated(please circle) Sq. Ft. \_\_\_\_\_

Garage Sq. Ft. \_\_\_\_\_ Attached/Detached (please circle) Heated/Unheated(please circle) Room Over Garage Sq. Ft. \_\_\_\_\_

Carport Sq. Ft. \_\_\_\_\_ Porch Sq. Ft. \_\_\_\_\_ Patio Sq. Ft. \_\_\_\_\_

Number of: Baths \_\_\_\_\_ Bedrooms \_\_\_\_\_ Fireplace \_\_\_\_\_ Rooms \_\_\_\_\_ Stories \_\_\_\_\_ Units \_\_\_\_\_

Type of Fuel:  Electric - #Amps \_\_\_\_\_  Gas - # Outlets \_\_\_\_\_ Outlet Type: Range/H2O/Heat/Fire/Grill/Other

Cost of: Mechanical \$ \_\_\_\_\_ Land \$ \_\_\_\_\_ Construction \$ \_\_\_\_\_

### OFFICE USE ONLY

Primary Structure (sq. ft. \_\_\_\_\_ )

Cost per sq. ft. \$ \_\_\_\_\_ Construction value \$ \_\_\_\_\_

Secondary Structure (sq. ft. \_\_\_\_\_ )

Cost per sq. ft. \$ \_\_\_\_\_ Construction value \$ \_\_\_\_\_

#### PERMIT FEES

Primary Structure Permit Fee \$ \_\_\_\_\_

Primary Structure Plan Review Fee \$ \_\_\_\_\_

Secondary Structure Permit Fee \$ \_\_\_\_\_

Secondary Structure Plan Review Fee \$ \_\_\_\_\_

Impact Fee Res/Multi - Other \$ \_\_\_\_\_

Impact Fee Com/Off/Ind sq. ft. \_\_\_\_\_ \$ \_\_\_\_\_

Electrical Permit Fee \$ \_\_\_\_\_

Plumbing Permit Fee \$ \_\_\_\_\_

\_\_\_\_\_ sq. ft. x 2.30 = \_\_\_\_\_ Construction Value

Mechanical Permit Fee \$ \_\_\_\_\_

Gas Permit Fee \$ \_\_\_\_\_

Pool Permit Fee \$ \_\_\_\_\_

Dumpster Fee \$ \_\_\_\_\_

**Total Fee Due** \$ \_\_\_\_\_

Notes:

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Zoning Administrator \_\_\_\_\_ Date \_\_\_\_\_

Date of ARB Approval \_\_\_\_\_

Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

Permit Technician \_\_\_\_\_ Date \_\_\_\_\_

Scope of Work \_\_\_\_\_  
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Are there recorded covenants and restrictions for this property? Yes \_\_\_\_\_ No \_\_\_\_\_

Do these covenants and restrictions prohibit any of the features being 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 Attach copy of DHEC Demolition/Renovation Permit to this application

Fire Sprinkler System: Yes/No Attach State Fire Marshall approved plans to this application

SC DHEC Asbestos Section  
2600 Bull Street  
Columbia, SC 29201  
803-898-4289

State Fire Marshall  
Division of State Fire Marshall  
141 Monticello Trl.  
Columbia, S.C. 29203  
803-896-9800

*Applicant Certification*

I \_\_\_\_\_ understand that if my scope of work changes in any way after the submittal and approval of this permit, I must contact the Building Permits Department for additional permits. If I perform work not permitted under this permit or another permit issued to me, a stop work order will be placed on the site of construction and all work will cease until proper permits are obtained. Permit becomes void if work authorized is not begun and/or completed within six months of the permit issue date. I have examined this application and certify it to be true and correct. I agree the work will be accomplished in accordance with all city, state, and federal codes or laws regulating construction or the performance thereof.

\_\_\_\_\_  
Signature of Contractor/Agent/Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title