

FLOOD ZONE \_\_\_\_\_  
BFE \_\_\_\_\_  
PANEL \_\_\_\_\_  
ECERT REQ \_\_\_\_\_  
APPROVED BY \_\_\_\_\_

## HAMPTON COUNTY

### Permit Application

201 Jackson Ave West  
Hampton SC 29924  
803-914-2127

DATE IN \_\_\_\_\_  
CLERK \_\_\_\_\_  
REVIEW # \_\_\_\_\_  
DATE OUT \_\_\_\_\_  
APPROVED BY \_\_\_\_\_

Applicant Name \_\_\_\_\_  
Applicant Email \_\_\_\_\_

Telephone # \_\_\_\_\_

Property Owner (as listed on Tax Record) \_\_\_\_\_

Property Owner Email \_\_\_\_\_ Telephone # \_\_\_\_\_

Property Owner Mailing Address \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Site Address \_\_\_\_\_ Historic District: Yes \_\_\_\_\_ No \_\_\_\_\_

Subdivision/Project \_\_\_\_\_ Building# \_\_\_\_\_ # of Units \_\_\_\_\_ Occup. Class \_\_\_\_\_ Occup. Load \_\_\_\_\_

Type of Work: New: \_\_\_\_\_ Addition: \_\_\_\_\_ Alter: \_\_\_\_\_ Repair: \_\_\_\_\_ Move: \_\_\_\_\_ Demolish: \_\_\_\_\_ Other: \_\_\_\_\_

Use of Improvement: Residential: \_\_\_\_\_ Single Family: \_\_\_\_\_ 2 Family: \_\_\_\_\_ Town House \_\_\_\_\_ Occupancy Classification \_\_\_\_\_

Commercial \_\_\_\_\_ Multi Family \_\_\_\_\_ Educational \_\_\_\_\_ Business \_\_\_\_\_ Institutional \_\_\_\_\_ Manufacturing \_\_\_\_\_ Warehouse \_\_\_\_\_

Construction Material: Steel \_\_\_\_\_ Wood \_\_\_\_\_ Masonry \_\_\_\_\_ Other \_\_\_\_\_ Construction Type \_\_\_\_\_

Exterior: Brick Veneer \_\_\_\_\_ Conc Block \_\_\_\_\_ Stone \_\_\_\_\_ Stucco \_\_\_\_\_ Metal \_\_\_\_\_ Wood \_\_\_\_\_ Vinyl \_\_\_\_\_ Other \_\_\_\_\_

Type of Heating: Furnace \_\_\_\_\_ Central Air \_\_\_\_\_ Heat Pump \_\_\_\_\_ Other \_\_\_\_\_ Sprinkler Sys Req: Yes \_\_\_\_\_ No \_\_\_\_\_

Type of Fuel: Electricity \_\_\_\_\_ Gas \_\_\_\_\_ Oil \_\_\_\_\_ Other \_\_\_\_\_ Fireplace( #) \_\_\_\_\_ Type \_\_\_\_\_

No. of Stories \_\_\_\_\_ Bedrooms \_\_\_\_\_ Bathrooms \_\_\_\_\_ Half Baths \_\_\_\_\_ Total # of Rooms \_\_\_\_\_

Heated Area: 1<sup>st</sup> Floor \_\_\_\_\_ 2<sup>nd</sup> Floor \_\_\_\_\_ Other \_\_\_\_\_ Total \_\_\_\_\_

Unheated Area: Garage \_\_\_\_\_ Carport \_\_\_\_\_ Porches \_\_\_\_\_ Decks \_\_\_\_\_ Total \_\_\_\_\_

Total Square Footage \_\_\_\_\_ Power Company: \_\_\_\_\_

Scope of Work: \_\_\_\_\_

Value of Construction \$ \_\_\_\_\_ (Including Materials & Labor)

Building Permit Fee \$ \_\_\_\_\_ Permit # \_\_\_\_\_

Plan Review Fee \$ \_\_\_\_\_ Risk Cat \_\_\_\_\_ Wind Zone \_\_\_\_\_ Seismic Zone \_\_\_\_\_

Total Fees \$ \_\_\_\_\_

Contractor/Builder: \_\_\_\_\_ Telephone# \_\_\_\_\_

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

State License # \_\_\_\_\_ Business License # \_\_\_\_\_

Architect/Engineer: \_\_\_\_\_ Telephone# \_\_\_\_\_

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

Estimated Date of Completion \_\_\_\_\_ TMS# \_\_\_\_\_ Zone \_\_\_\_\_ Verified \_\_\_\_\_

Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_

**THIS PERMIT MAY BE SUSPENDED OR REVOKED FOR VIOLATION OF ANY REGULATION IN EFFECT BY ORDINANCY OR  
OTHERWISE – BUILDING PERMITS ARE NOT REFUNDABLE OR TRANSFERABLE**

Issued By \_\_\_\_\_

Submitted By \_\_\_\_\_

Signature: Owner \_\_\_\_\_ Agent \_\_\_\_\_ Contractor \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_