

# Greenville County

Greenville County Square  
301 University Ridge, Suite 4100, Greenville SC 29601-3686  
Phone (864) 467-7060 Fax (864) 467-7407  
permits@greenvillecounty.org

## RESIDENTIAL ADDITION/ALTERATION APPLICATION

APPLICATION MUST BE COMPLETED PRIOR TO REQUESTING PERMIT

Date: \_\_\_\_\_ Property Owner's Name: \_\_\_\_\_ Phone No: \_\_\_\_\_  
Exact Address of Property: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Subdivision Name: \_\_\_\_\_ Lot No: \_\_\_\_\_ Tax Map No: \_\_\_\_\_ Mobile No: \_\_\_\_\_  
Description of work \_\_\_\_\_  
Project Valuation \$ \_\_\_\_\_ Additional Square Footage? \_\_\_\_\_ Is this a Corner Lot? \_\_\_\_\_  
If Detitle/M-Home permit#? \_\_\_\_\_ Demo Permit? \_\_\_\_\_ If Pool/ In ground or Above? \_\_\_\_\_  
**PLEASE LIST ANY EXISTING OR ACTIVE PERMIT NUMBERS:** \_\_\_\_\_

### **CONTRACTOR** \*faxing or emailing application, also fax a copy of the contractor's license\*

Name: \_\_\_\_\_ Co. Name: \_\_\_\_\_ License No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Phone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_ Fax No: \_\_\_\_\_  
Email: \_\_\_\_\_

### **ELECTRICAL CONTRACTOR**

Name: \_\_\_\_\_ Co. Name: \_\_\_\_\_ License No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Phone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_ Fax No: \_\_\_\_\_  
NEW SERVICE INFORMATION: No. of Amps: \_\_\_\_\_ No. of Breakers: \_\_\_\_\_ Name of Power Company: \_\_\_\_\_  
 Existing Panel  Upgrade No. of Amps being added \_\_\_\_\_ No. of Breakers being added \_\_\_\_\_

### **MECHANICAL CONTRACTOR**

Name: \_\_\_\_\_ Co. Name: \_\_\_\_\_ License No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Phone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_ Fax No: \_\_\_\_\_  
No. of Heating & Cooling Units of each type: Propane \_\_\_\_\_ Gas Pack \_\_\_\_\_ Gas Furnace \_\_\_\_\_ Heat Pump \_\_\_\_\_ Wood \_\_\_\_\_  
No. of Water Heaters of each type: Gas \_\_\_\_\_ Electric \_\_\_\_\_ Name of Gas Company: \_\_\_\_\_  
No. of Gas Appliances: Gas Logs \_\_\_\_\_ Gas Grill \_\_\_\_\_ Gas Stove \_\_\_\_\_ Other, provide description \_\_\_\_\_  
No. of Fireplaces: Brick \_\_\_\_\_ Prefab \_\_\_\_\_  Check here if gas line goes to a brick fireplace.

### **PLUMBING CONTRACTOR**

Name: \_\_\_\_\_ Co. Name: \_\_\_\_\_ License No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Phone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_ Fax No: \_\_\_\_\_  
No. of Plumbing Fixtures: \_\_\_\_\_ (Including but not limited to: kitchen sink, dishwasher, garbage disposal, hot water heater, washer, laundry sink, all bathroom fixtures) Septic Tank \_\_\_\_\_ OR Sewer \_\_\_\_\_

**EXACT DIRECTIONS TO JOB SITE (from a main road):** \_\_\_\_\_

Applications must be faxed to the Permit Application Center 48 hours in advance of permit pick up. For information regarding culverts, driveways, or encroachment permits, contact 467-7016 if the property is on a county road or 241-1224 if the property is on a state road.

The applicant hereby certifies and agrees as follows: 1) That he/she is authorized to make this application; 2) That he/she has read the above information and it is true and correct; 3) That he/she will comply with all County of Greenville ordinances, laws and regulations, all State and Federal Laws and regulations regulating the use of land and structures and the construction of structures; 4) That he/she will perform only the work outlined above at the property indicated above; 5) That he/she grants the right of entry to the property to the Building Official or employees of the County of Greenville for the purpose of inspections, and posting of notices. If any of the information supplied by the owner and/or owner's agent is incorrect, the permit may be revoked.

**THIS PERMIT WILL BECOME INVALID WITHIN 6 MONTHS FROM DATE OF ISSUE IF: WORK HAS NOT COMMENCED, IF AN INSPECTION HAS NOT BEEN REQUESTED, OR IF WORK HAS BEEN SUSPENDED FOR A PERIOD OF 6 MONTHS.**

This permit is permission to proceed with construction and shall not be construed as authority to violate, alter or set aside any of the provisions of the Building Code and any other applicable laws or ordinances, nor shall the issuance of this permit prevent the Building Official from requiring correction of errors in construction documents or of violations of the Building Code of the County of Greenville, South Carolina.

DATE: \_\_\_\_\_ BY OWNER OR AUTHORIZED AGENT: \_\_\_\_\_  
PRINT NAME: \_\_\_\_\_  
Cost of Permit: \$ \_\_\_\_\_



**Greenville  
County**

# Grading/Erosion Control Acknowledgement Single Family Residential Construction

Site Location Address: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Subdivision Name: \_\_\_\_\_ Lot #: \_\_\_\_\_

Owner, Builder, or General Contractor (please initial each section):

- ( ) I certify that I have been given a copy of the *Single Family Residential Erosion/Sediment Control Standards* booklet or that I will use the link below to print out and reference these standards:  
[http://www.greenvillecounty.org/land\\_development/pdf/erosion\\_sediment\\_contol\\_standard.pdf](http://www.greenvillecounty.org/land_development/pdf/erosion_sediment_contol_standard.pdf)
- ( ) I certify that I will follow the Stormwater Pollution Prevention Plan (SWPPP) for the subdivision or comply with requirements outlined in the *Single Family Residential Erosion/Sediment Control Standards*
- ( ) I am responsible for implementing, maintaining and monitoring effectiveness of the SWPPP during construction on the lot(s) listed above
- ( ) I understand and agree to implement required erosion and sediment control measures described or outlined in the *Single Family Residential Construction Erosion/Sediment Control Standards*
- ( ) I understand that I may need to supplement or modify implemented protection measures as site conditions develop to control on-site erosion and ensure all site runoff is adequately treated by stormwater controls
- ( ) I am responsible for actions of all subcontractors and delivery personnel at the worksite as they relate to the SWPPP and *Single Family Residential Construction Erosion/Sediment Control Standards*
- ( ) I understand that if this lot is a part of a larger common plan of development without developer-provided NOI coverage I must apply for Individual Lot (IL)-NOI coverage as required by SC DHEC (Stormwater Permitting-2600 Bull St., Columbia, SC 29201). Or, if I am disturbing over 1 acre of land that is not a part of a larger common plan of development, I will obtain a land disturbance permit from the Land Development Division (301 University Ridge, Suite 3900, Greenville, SC, 29601)
- ( ) I acknowledge that non-compliance of *Single Family Residential Construction Erosion/Sediment Control Standards* will result in Notice of Violations and/or Stop Work Orders. Non-compliance may also lead to permit suspension, revocations, penalty fees, and civil penalties starting at \$1000.00 per day

\_\_\_\_\_  
**Company Name or Property Owner (please print)**

\_\_\_\_\_  
**Street Address**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**Zip Code**

\_\_\_\_\_  
**Telephone**

\_\_\_\_\_  
**Fax**

\_\_\_\_\_  
**Contact Name (if owner is company-please print)**

\_\_\_\_\_  
**Signature**

**Building Permit Number:** \_\_\_\_\_ **Issued By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Jurisdiction:**     **Unincorporated**     **Fountain Inn**     **Mauldin**     **Simpsonville**     **Travelers Rest**

For more information visit [www.scdhec.gov/stormwater](http://www.scdhec.gov/stormwater)

Original copy: Codes Enforcement  
Carbon (yellow) copy: Property Owner

