City of Charleston New Single Family Permit Application

Name and Add	lress of Property (Owner			
Contractor				Cell N	0
Office No	E	-mail			
State License	No	c	ity Business L	icense No.	·
******	******	******	******	*****	*****
Lot Bloc	ck Parcel_	Addres	s (if known)		
Subdivision		Ph	aseTM	s	Zoning
Heated Square	Feet 1 st floor:	:	2 nd floor:		3 rd floor:
Unheated Squ	are Feet (Include	s garages, p	orches, decks)	
Actual setbac	ks: Front	Rear	_ North/East S	ide	South/West Side
Height of Dwe	elling:	(mea	asured from the o	urb to the h	ighest point of the finished roof)
*Is this an Aff application stating	ordable Housing that the construction	g Project? n meets the Affo	(If yes, rdable Housing O	a letter must rdinance req	be included with this uirements.)
REVIEW REQUIR	RES THE FOLLOWI	NG PLANS WIT	H THIS APPLICA	ATION:	
Please see ched	cklist for full require	ements. Plans <u>v</u>	<u>vill not</u> be accep	ted if all red	quirements have not been met.
THREE (3) SCAL	_ED SITE PLANS sh	ould be prepare	d, signed and sea	aled by a So	uth Carolina licensed professiona
(i.e. surveyor or e	engineer; include stat <u>E PLAN</u> – 1 Copy	e registration nu	mber on the site	plan)	
2. MANUAL J de	etailing HVAC calcula	ation- 1 copy			
3. INTERNATIO	NAL ENERGY CON	SERVATION CO	DE FORM 1 cop	у	
- Indicatir of the finished roo - Plans b - Founda - Framing - Floor Pl	of. y a registered design tion plan g Details or floor, wal ans e how glazing will be p	illdings measure professional I, ceiling, roof, h	eaders, beams, a		et elevation, to the highest point
	ing permit and inspectio 4-3782 for permit informa			ed prior to the	issuance of a Certificate of
For customer se	ervice, please conta	ct the Custome	r Service Coord	inator at 84	3-973-7225
For technical inf	formation, please co	ontact the follow	-		
GIS Engineering	843-805-3230 843-724-3782		Zoning Inspections	843-724- 843-724	
-I certify that the improvement(s) the subject prop	information on the comply with private	e neighborhood	d its attachment I covenants, if th	s is correct nere are any	t, that the proposed y, and that I am the owner of the subject property to be
Applicant's Signa	ture			Da	te

^{***}You must fill out the second section of this application for your submittal to be considered complete. The International Residential Code Correction Sheet (IRC) is required by the Building Inspections Division for plan review. ***

	Permit Number
SF	

International Residential Code Correction Sheet

Contractor:					
Address of Project (if known):					
Number of: Stories Rooms Bathrooms Bedrooms Kitchens					
Type of Construction: Exterior of Building:					
Type of: Heat (electric or gas) Roof Covering					
Foundation (If slab, monolithic or raised: piers or continuous wall):					
Fireplace (prefab or site built, wood burning or gas):					
Are roof trusses being used? Is sewer available? (If not, DHEC septic tank approval must be submitted)					
Permit includes: Electrical (), Plumbing (), Mechanical (), Gas (), Separate permit to be obtained.					
Window Agreement: (Please sign and date)					
(Owner/Contractor/Agent) will install windows that meet the					
American Architectural Manufacturer's Association specification per 2018 SCRC sec. R609.3 for the following					
address					
Signature Date					

ITEMS NOTED BELOW SHALL BE CORRECTED IN THE FIELD					
() Submit under construction flood zone elevation certificate prior to rough-in inspections. () Submit finished construction flood zone elevation certificate prior to final inspections. () Submit as-built v-zone and break away wall certifications prior to final inspections.					
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