

City of Charleston New Single Family Permit Application

Name and Address of Property Owner _____

Contractor _____ Cell No. _____

Office No. _____ E-mail _____

State License No. _____ City Business License No. _____

Lot _____ Block _____ Parcel _____ Address (if known) _____

Subdivision _____ Phase _____ TMS _____ Zoning _____

Heated Square Feet 1st floor: _____ 2nd floor: _____ 3rd floor: _____

Unheated Square Feet (Includes garages, porches, decks) _____

Actual setbacks: Front _____ Rear _____ North/East Side _____ South/West Side _____

Height of Dwelling: _____ (measured from the curb to the highest point of the finished roof)

*Is this an Affordable Housing Project? _____ (If yes, a letter must be included with this application stating that the construction meets the Affordable Housing Ordinance requirements.)

REVIEW REQUIRES THE FOLLOWING PLANS WITH THIS APPLICATION:

Please see checklist for full requirements. Plans will not be accepted if all requirements have not been met.

1. **THREE (3) SCALED SITE PLANS** should be prepared, signed and sealed by a South Carolina licensed professional (i.e. surveyor or engineer; include state registration number on the site plan)
2. **MANUAL J** detailing HVAC calculation- 1 copy
3. **INTERNATIONAL ENERGY CONSERVATION CODE FORM** 1 copy
4. **TWO (2) SETS of BUILDING PLANS**
 - Indicating the height of all buildings measured from curb line elevation, or street elevation if there is no curb, to the highest point of the finished roof.
 - Plans by a registered design professional
 - Foundation plan
 - Framing Details or floor, wall, ceiling, roof, headers, beams, and girders
 - Floor Plans
 - Indicate how glazing will be protected from windborne debris
 - Structural details

NOTE: An Engineering permit and inspection by the Engineering Division is required prior to the issuance of a Certificate of Occupancy. Call 724-3782 for permit information and inspection requests.

For customer service, please contact the Customer Service Coordinator at 843-724-7450

For technical information, please contact the following:

GIS	843-805-3230	Zoning	843-724-3755
Engineering	843-724-3782	Inspections	843-724-7448

-I certify that the information on the application and its attachments is correct, that the proposed improvement(s) comply with private neighborhood covenants, if there are any, and that I am the owner of the subject property or the authorized representative of the owner. I authorize the subject property to be inspected for verification of same.

Applicant's Signature _____ Date _____

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.

This address and TMS number are correct per **Kittie Whiddon (GIS)**
_____ (Address Correction if Needed)

Permit Number

SF _____

International Residential Code Correction Sheet

*****THIS SECTION MUST BE COMPLETED BY THE APPLICANT*****

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 **2015 SC IRC, R609.3** for the following address _____.

Signature _____ Date _____

*******For office use only*******

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.

Approved By _____ Date _____

Corrections indicated above will be complied with.

Owner/Contractor/Agent _____ Date _____

Revised 2/20/2019