CITY OF LANCASTER

Building, Planning, Zoning & Licensing Department PO Box 1149 216 S. Catawba Street Lancaster, SC 29721 (803) 283-4253



BUILDING PERMIT APPLICATION

Date:	
Project Address: Tax Map:	Zoning:Site Plans
-	f land restricted by any recorded covenant that is contrary to, bits the permitted activity?YesNo
Property Owner:	
Address:	
Telephone:	
Contractor Name:	
S.C. State License #:	
Address:	
Telephone:	<u> </u>
Architect:	
Architect Address:	
Engineer:	
Engineer Address:	
Type of Permit:	□ BUILDING □ ELECTRICAL □ PLUMBING □ MECHANICAL □ GAS
Type of work:	□ RESIDENTIAL □ COMMERCIAL
	\square New Building \square Addition \square Renovation \square Demolition \square Other
	\square Single Family \square Two-Family \square Multi-Family
Description of work:	
Building Size:	
Total heated area:	
Bonus room: Garage:	
Porches:	
Is the Property Located in	a Designated FLOODWAY/FLOODPLAIN? Yes \Box No \Box
Valuation of work includ	ing Building, Electrical, Plumbing, Mechanical or Gas Systems:
regulated structures for the that these requirements a Visit http://www.scdhec.g SCDHEC at 803-898-4289	s regulations require responsible parties to have a DHEC licensed builder inspector inspect presence of asbestos and to obtain DHEC required asbestos project licenses. Please ensure are met prior to conducting any abatement, renovation or demolition activites. ov/environment/baq/Asbestos/regulatory_information.asp for more information or contact D. By signing this application, you are acknowledging that you have received the attached denovation, Demolition & Asbestos".
	nowledge that all information provided is true and correct and all work performed under this permit and specifications herewith submitted and shall conform to the City Code of Ordinances pertaining
Signature	Date
Received by	 Date