

APPLICANT'S SIGNATURE:

## LAURENS COUNTY BUILDING CODES P O BOX 815, LAURENS, SC 29360 PHONE (864) 984-6659 | FAX (864) 984-1502



DATE

## RESIDENTIAL BUILDING PERMIT APPLICATION

APPLICANT'S NAM	ЛЕ·									
PROPERTY OWNER'S NAME:										
PROPERTY 911 ADDRESS:										
CITY:					STATE:		ZIP:			
DAYTIME PHONE:					EMAIL:					
INSIDE TOWNSHII			NΔN	ME OF TOWNSHIP:						
FLOOD AREA:		YES	NO	INAIN	NE OF TOWNSH	IF.				
OFFICE USE ONLY										
TAX MAP #:					FIRE DISTRICT:		SCHOOL	_DISTRICT:		
PROJECT/WORK DESCRIPTION:										
PROJECT/WORK I	DESCR	IPTION:								
EXTERIOR VENEE	В	RICK	VIN	NYL OTHER	R (SPECIFY)					
TOTAL PROJECT COST:										
PROJECT COST LESS TRADES:										
# STORIES: # BEDROO			OOMS: # BATHROOMS:			OMS:	# OTHER:			
TOTAL SQ FT: HEAT			HEATE	D SQ FT: UN			IHEATED SQ FT:			
BASEMENT:	NONE	UNFINISHED		PARTIAL	FULL/FINISHED		SQ FT			
GARAGE:	NONE	ATTACHED		DETACHED	ETACHED		SQ FT			
FIREPLACE:	NONE	IN	ISERT		MASONRY					
CONTRACTOR:						SC	SC LICENSE #:			
CONTRACTOR'S ADDRESS:										
CITY:					STATE:		ZIP:			
PHONE NUMBER:					CONTRACTOR	CONTRACTOR EMAIL:				
UTILITIES										
SOURCE OF HEAT	Γ:	GAS	ELEC	TRIC	WOOD	AIR CONDI	TIONING:	YES	NO	
SEPTIC TANK:	NEV	V I	EXISTING	;	PUBLIC SEWE	R:	NEW	EXISTING		
POWER COMPANY:				GAS COMPANY:						
I HEREBY CERTIFY THAT THE INFORMATION GIVEN HEREIN IS CORRECT AND TRUE:										

DAYTIME PHONE: REV DATE: 3/14/2022