



Building Permit Application

200 N. 12th Street

West Columbia, S.C. 29171

www.westcolumbiasc.gov

General Project Information

Job Site Address: _____

Description of Work: _____

Does this parcel or tract of land have any restriction by any recorded covenant that conflicts with, or prohibits the activity for which you are applying for? Yes _____ No _____

Cost of Construction: _____ Estimated completion date: _____

Applicant Information

Applicant name: _____ LLR License Number: _____

Email: _____

Business or Homeowner name: _____

Address: _____ Phone number: _____

Residential / Commercial Structure

Total Square Feet: _____ Total Heated Square Feet: _____ Number of Floors: _____

Does the work include: ☐ Electrical ☐ HVAC ☐ Plumbing ☐ Gas ☐ Other _____

Mechanical

If this permit is for Mechanical work, check which:

☐ Electrical Cost _____

☐ HVAC Cost _____

☐ Plumbing Cost _____

☐ Gas Cost _____

☐ Solar Panels Cost _____

☐ Other Cost _____

Repair

If this permit is for Repair work, check which:

☐ Roof ☐ Siding/Windows ☐ Deck/Railing ☐ Foundation ☐ Other _____

Accessory / Pool

If this permit is for an Accessory, please provide plans:

Type of accessory: _____

Total square feet of accessory: _____

Does the work include the following:

☐ Plumbing ☐ Electrical ☐ HVAC ☐ Structural ☐ Other _____

Addition

If this permit is for an Addition, please provide plans:

Type of addition: _____ Total Square feet of addition: _____

Does the work include the following:

☐ Plumbing ☐ Electrical ☐ HVAC ☐ Structural ☐ Other _____

Upfit / Alteration

If this permit is for an Upfit/Alteration, please provide plans:

Current Occupancy: _____ Proposed Occupancy: _____ Total Sqft: _____

Does the work include the following:

☐ Plumbing ☐ Electrical ☐ HVAC ☐ Structural ☐ Other _____

Demolition / Moving

If this permit is for Demolition / Moving, an asbestos survey or form from S.C. DES must be attached with this application.

Does the work include the following:

☐ Plumbing ☐ Electrical ☐ HVAC ☐ Structural ☐ Other _____

Signature: _____ **Date:** _____

To request building inspections, please email us at:

inspections@westcolumbiasc.gov

If you have any questions, please call us at (803) 936-628

Please include:

- 1) Address
- 2) Permit Number
- 3) Type of Inspection

Permit Numbers:

Building: _____

Plumbing: _____

Mechanical: _____

Electrical: _____

Gas: _____