

Town of Varnville

Building and Planning Department

95 East Palmetto Ave.
Varnville, SC 29944
P: (803) 943-2979

FLOOD ZONE _____
BFE _____
PANEL _____
ECERT REQ _____
APPROVED BY _____

DATE IN _____
CLERK _____
REVIEW # _____
DATE OUT _____
APPROVED BY _____

Property Owner (as Listed on Tax Record) _____

Property Owner eMail _____ Telephone # _____

Property Owner Mailing Address _____ Cell Phone# _____

Site Address _____ HISTORIC DISTRICT: Yes ___ No ___

Sub Division/Project _____ Bld# _____ # of Units _____ Occ. Class _____ Occ. Load _____

Type of Work: New: ___ Addition: ___ Alter: ___ Repair: ___ Move: ___ Demolish: ___ Other: _____

Use of Improvement: Residential: ___ Single Family: ___ 2 Family: ___ Town House: ___ Occupancy Classification _____

Commercial: ___ Multi Family: ___ Educational: ___ Business: ___ Institutional: ___ Manufacturing: ___ Warehouse: ___

Construction Material: Steel: ___ Wood: ___ Masonry: ___ Other: _____ Const Type: _____

Exterior: Brick Veneer: ___ Conc. Block: ___ Stone: ___ Stucco: ___ Metal: ___ Wood: ___ Vinyl: ___ Other: _____

Type of Heating: Furnace: ___ Central Air: ___ Heat Pump: ___ Other: _____ Sprinkler Sys Req: Yes ___ No ___

Type of Fuel: Electricity: ___ Gas: ___ Oil: ___ Other: _____ Fireplace(#): _____

Type: _____

No. of Stories: ___ Bedrooms: ___ Bathrooms: ___ Half Baths: ___ Total # of Rooms: _____

Heated Area: 1st Floor: _____ 2nd Floor: _____ Other: _____ Total: _____

Unheated Area: Garage: _____ Carport: _____ Porches: _____ Decks: _____ Total: _____

Total Square Footage: _____

Scope of

Work: _____

Value of Construction \$ _____ (Including Materials & Labor)

Building Permit Fee \$ _____ Permit # _____

Plan Review Fee \$ _____ Risk Cat _____ Wind Zone _____ Seismic Zone _____

Zoning Fee \$ _____

\$ _____ Farm # _____

TOTAL FEES \$ _____

Contractor/Builder: _____ Telephone #: _____

Address: _____ eMail: _____

State License #: _____ Business License #: _____

Architect/Engineer: _____ Telephone #: _____

Address: _____ eMail: _____

Estimated Date of Completion: _____ TMS: _____ Zone: _____ Verified: _____

SETBACKS: Front _____ Rear _____ Left _____ Right _____

**THIS PERMIT MAY BE SUSPENDED OR REVOKED FOR VIOLATION OF ANY REGULATION IN EFFECT BY
ORDINANCE OR OTHERWISE – BUILDING PERMITS ARE NOT REFUNDABLE OR TRANSFERABLE**

Issued By _____

Submitted By _____

Signature Owner: _____ Agent: _____ Contractor: _____

Date

Print Name