

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: ___
Construct on 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



PAYMENT OPTIONS:

We accept in-person payments by check, cash, or credit card.

Credit card payments can also be made over the phone.

Payments can be mailed to our PO Box.



P.O. Box: 308
Varnville, SC 29944



APPLICATION SUBMISSION

Once completed, please email your application to:

admin@varnville.sc.gov

for review and processing.