

# MISCELLANEOUS PERMIT FOR CONSTRUCTION IN CITY OF BEAUFORT, SOUTH CAROLINA

DIVISION OF INSPECTIONS  
701 Craven St., Beaufort, SC 29902  
PH: (843) 525-7040 – FAX: (843) 986-5606

PERMIT NUMBER: \_\_\_\_\_

PERMIT FEE: \$ \_\_\_\_\_

DISTRICT	TAX MAP SHEET	SUB-MAP	PARCEL	BLOCK	DATE ISSUED
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LOCATION OF BUILDING    LOT \_\_\_\_\_    BLOCK \_\_\_\_\_    SUBDIVISION \_\_\_\_\_  
STREET \_\_\_\_\_

FLOOD ZONE \_\_\_\_\_    ELEVATION REQUIRED \_\_\_\_\_    MSL

NAME	MAILING ADDRESS, NO. ST.	CITY & STATE	ZIP CODE	TELEPHONE NO.
OWNER				
GEN. CONT.				

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Mobile Home                    \$ _____<br><input type="checkbox"/> Swimming Pool                    \$ _____<br><input type="checkbox"/> Demolition                         \$ _____<br><input type="checkbox"/> Sign                                     \$ _____<br><input type="checkbox"/> Moving Structures                 \$ _____<br><input type="checkbox"/> Tree Removal                        \$ _____ |  | <input type="checkbox"/> Plumbing                            \$ _____<br><input type="checkbox"/> HVAC                                    \$ _____<br><input type="checkbox"/> Gas                                      \$ _____<br><input type="checkbox"/> Electric                                \$ _____<br><input type="checkbox"/> Safety                                  \$ _____<br><input type="checkbox"/> Misc. _____                    \$ _____ |
|--|--|--|

TOTAL: \$ \_\_\_\_\_

ANY HORIZONTAL OR VERTICAL CONSTRUCTION REQUIRES THE FOLLOWING INFORMATION:

LOT SQUARE FOOTAGE: \_\_\_\_\_ SQ. FT.

EXISTING IMPERVIOUS SURFACE: \_\_\_\_\_ SQ. FT. (INCLUDING HOUSE, DRIVEWAYS, SIDEWALKS, ETC.)

NEW IMPERVIOUS SURFACE: \_\_\_\_\_ SQ. FT.

PERVIOUS SURFACE: \_\_\_\_\_ SQ. FT.

"IT IS UNDERSTOOD AND AGREED BY THE UNDERSIGNED OWNER OR AGENT THAT THE APPROVAL OF THIS PERMIT DOES NOT CONSTITUTE A PRIVILEGE TO VIOLATE THE BUILDING CODE, ZONING ORDINANCE, OR OTHER ORDINANCES OF THE CITY OF BEAUFORT AND THAT ANY OMISSION OF OR MISREPRESENTATION OF FACT WITH OR WITHOUT INTENTION OF THE UNDERSIGNED, OR ANY ALTERATION OR CHANGE FROM THIS PERMIT WITHOUT THE APPROVAL OF THE BUILDING OFFICIAL SHALL CONSTITUTE SUFFICIENT GROUND FOR THE REVOCATION OF THIS PERMIT. THIS PERMIT DOES NOT AUTHORIZE ANY ENCROACHMENT UPON COUNTY PROPERTY."

# WASTE DISPOSAL VERIFICATION

Please complete the following information. This form must be completed and left with the Building Permit Office.

Name of Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (work): \_\_\_\_\_ (home): \_\_\_\_\_

Contact Person: \_\_\_\_\_

Property Owner: \_\_\_\_\_  
(of the property where the waste is being generated)

Address of Property Owner: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Property Location: \_\_\_\_\_

Planned disposal method (recycling, disposal at C & D landfill, disposal at MSW, etc.):

\_\_\_\_\_

Waste Hauling Company: \_\_\_\_\_

Planned location of disposal: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## SEND COPY TO:

James S. Minor, Jr., Superintendent  
Beaufort County Public Works  
120 Shanklin Road  
Beaufort, SC 29902  
Phone: (843) 470-6406 Fax: (843) 470-6422  
E-mail: jminor@bcgov.net

# SUBCONTRACTOR LIST AFFIDAVIT

CITY OF BEAUFORT BUSINESS LICENSE

P. O. DRAWER 1167

BEAUFORT, SC 29901

Ph: (843) 525-7025/Fax: (843) 525-7013

OWNER: \_\_\_\_\_ PERMIT #: \_\_\_\_\_

PRIME CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

SITE ADDRESS: \_\_\_\_\_

## OWNER HIRING NO SUBCONTRACTORS:

AS THE OWNER OF THE ABOVE SITE ADDRESS, I WILL BE DOING ALL THE WORK FOR THE PROJECT LISTED ON THE ABOVE PERMIT #. I UNDERSTAND THAT IF I HIRE SOMEONE ELSE TO DO ANY OF THE WORK, I WILL NEED TO COMPLETE THE LOWER PORTION AND RETURN TO THE BUSINESS LICENSE DEPARTMENT PRIOR TO RECEIVING MY FINAL INSPECTION APPROVAL FROM THE CITY CODES ENFORCEMENT OFFICE.

SIGNATURE: \_\_\_\_\_ PHONE: \_\_\_\_\_ DATE: \_\_\_\_\_

## OWNER OR PRIME CONTRACTOR WITH HIRED SUBCONTRACTORS:

I UNDERSTAND, AS A PRIME CONTRACTOR OR OWNER, THAT I AM TO ENSURE THAT ALL SUBCONTRACTORS HAVE A CURRENT CITY OF BEAUFORT BUSINESS LICENSE AND ARE REGISTERED WITH THE STATE (WHERE APPLICABLE) AND THAT ALL LICENSE FEES ARE PAID. I UNDERSTAND NO FINAL INSPECTION WILL BE APPROVED UNTIL THE LICENSE STATUS OF THE SUBCONTRACTORS LISTED BELOW ARE VERIFIED AND APPROVED BY THE CITY OF BEAUFORT BUSINESS LICENSE DEPARTMENT.

SIGNATURE: \_\_\_\_\_ PHONE: \_\_\_\_\_ DATE: \_\_\_\_\_

## LIST BELOW ALL THE SUBCONTRACTOR(S) WHO WORKED ON THE ABOVE MENTIONED JOB BY THE HOUR, THE JOB, OR BY CONTRACT:

Subcontractor business name: \_\_\_\_\_ **OFFICIAL USE:**  
Sub's address/phone: \_\_\_\_\_ Lic #: \_\_\_\_\_  
Type of Sub's work done: \_\_\_\_\_ Lic Fee: \_\_\_\_\_  
Date work started: \_\_\_\_\_ Job cost: \_\_\_\_\_ Lic Pd: \_\_\_\_\_

Subcontractor business name: \_\_\_\_\_ **OFFICIAL USE:**  
Sub's address/phone: \_\_\_\_\_ Lic #: \_\_\_\_\_  
Type of Sub's work done: \_\_\_\_\_ Lic Fee: \_\_\_\_\_  
Date work started: \_\_\_\_\_ Job cost: \_\_\_\_\_ Lic Pd: \_\_\_\_\_

Subcontractor business name: \_\_\_\_\_ **OFFICIAL USE:**  
Sub's address/phone: \_\_\_\_\_ Lic #: \_\_\_\_\_  
Type of Sub's work done: \_\_\_\_\_ Lic Fee: \_\_\_\_\_  
Date work started: \_\_\_\_\_ Job cost: \_\_\_\_\_ Lic Pd: \_\_\_\_\_

Subcontractor business name: \_\_\_\_\_ **OFFICIAL USE:**  
Sub's address/phone: \_\_\_\_\_ Lic #: \_\_\_\_\_  
Type of Sub's work done: \_\_\_\_\_ Lic Fee: \_\_\_\_\_  
Date work started: \_\_\_\_\_ Job cost: \_\_\_\_\_ Lic Pd: \_\_\_\_\_

## BELOW IS A SAMPLE LIST OF THE TYPE OF WORK THAT IS ASSOCIATED WITH CONSTRUCTION RELATED JOBS. LIST SUBCONTRACTORS WHO DID THESE AND ANY UNLISTED JOB TYPES ON THIS PROJECT:

**INSTALLATION CATEGORIES:** AUTOMATIC IRRIGATION/FIRE SPRINKLER, AWNING/SIGN, BURGULAR/FIRE ALARM SYSTEM, CABINET, CARPET/VINYL/FLOORING, CARPENTRY, CEILING, CERAMIC TILE, CHIMNEY, COUNTER TOPS, DOORS, ELEVATOR, FENCE, FIREPLACE, GARAGE DOORS, GAS, GLASS, GREASE TRAP, HOOD SYSTEM, IRON/STEEL, KITCHEN/BATH/BOOKCASE, RADIO/TV/SATELITE DISH, SCREEN, SEWER, SEPTIC TANK, SIDING, TELEPHONE/PA SYSTEMS, TRUSSES AND OTHERS.

**OTHER CATEGORIES:** BLOCK/BRICK MASONRY, CLEANING SERVICES, CONCRETE FINISHER, INTERIOR DECORATOR, DRYWALL, ELECTRICAL, EXTERMINATOR/PEST CONTROL, FRAMING, HVAC, HOUSE MOVER/DEMOLITION, INSULATION, LOT CLEARING, LAND DEVELOPMENT/IMPROVEMENTS, LANDFILLING, LANDSCAPING, MILLWORK, PAINTING, PAVING, PLUMBING, PORTABLE TOILETS, ROOFING, SECURITY SERVICES, STUCCO, SWIMMING POOL, TIN/METAL, TREE SURGEON/REMOVAL, TRIM CARPENTER, TRIM INTERIOR/EXTERIOR, WALLPAPER HANGER, WASTE BIN RENTAL, WELL DRILLING, WINDOWS & OTHERS.

**STATEMENT OF UNDERSTANDING BY PRIME CONTRACTOR**

1. Subcontractors shall be licensed on the same basis as general or prime contractors for the same job, and no deductions shall be made by a general or prime contractor for value of work performed.
2. The contractor must furnish the City a list, including the NAME, ADDRESS, AND AMOUNT OF EACH CONTRACT for all subcontractors and individual craftsmen or artisans, not regularly employed by the job by contract, by day labor, or by the hour and receive pay therefor.
3. If the subcontractor or craftsmen are unknown at the time the permit is applied for, the prime contractor shall furnish the City with such a list prior to the subcontractor's performance of said work.
4. The prime contractors, before requesting permanent utility service or final inspection (Certificate of Occupancy) from the Codes Enforcement Office, SHALL complete said subcontractors list and turn in and forward same to the Business License Office for verification, along with all fees paid in full.
5. As the prime contractor, it is your responsibility to make sure all subcontractors working on your job have a current business license and are registered with the State (if applicable). If not, as the prime contractor, you will be responsible for the subcontractors business license fees. Such violations shall be punishable by a fine not to exceed the maximum penalty allowed by state law and/or 30 days imprisonment, or both, at the discretion of the court for each violation. **THERE WILL BE NO EXCEPTIONS TO THIS REQUIREMENT.**

I, the undersigned, have read and understand the above statement and have received the subcontractor's form from the Codes Enforcement Office or the Business License Office.

SITE ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_

COMPANY'S NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_ PERMIT: \_\_\_\_\_