

Demolition Permit Application

Building Permitting Department

Florence Office
218 W. Evans St, Florence, SC 29501
Phone(843)676-8600 Fax(843)676-8613

Lake City Office
345 S Ron McNair Blvd, Lake City, SC 29560
Phone(843)394-8373 Fax(843)394-5563

City of Florence 665-3173
 Florence County 676-8600
 City of Johnsonville 386-2069

City of Lake City 374-5421
 Town of Olanta 396-4301
 Town of Pamplico 493-5551

Town of Quinby 669-3031
 Town of Scranton 389-2222
 Town of Timmonsville 346-7942

Owner: _____ Date: _____

ZC#: _____ Tax Map/Block/Parcel _____

Project Location

Street No. _____ Street Name _____ City _____ Zip Code _____

TYPES OF OCCUPANCY : ASSEMBLY BUSINESS EDUCATIONAL INDUSTRIAL HAZARDOUS INSTITUTIONAL
 MERCANTILE STORAGE RESIDENTIAL

ESTIMATED START DATE _____ ESTIMATED DATE OF COMPLETION _____

TOTAL CUBIC FEET OF DEBRIS: _____

No of Stories _____ Total Floor Area based on exterior dimensions (Sq ft) _____

Description of work:

1. Work requiring a permit shall not commence until the permit holder or his agent posts the permit card in a conspicuous place on the premises.
2. Permit is void if job is not started in 6 months from date of issuance.
3. The undersigned owner or agent understands that approval of this application does not constitute a privilege to violate any applicable government ordinances, codes or laws, and that any omission of or misrepresentation of fact with or without intention of the undersigned or any alteration or change from this application, shall constitute grounds for the revocation of any permit issued which was based on the approval of this application.
- 4. Contractor is responsible to notify DHEC and public utilities prior to the commencement of demolition.**
- 5. If the demolition proposed is in the City of Florence, review of historical significance by the Florence City/County Historical Commission is required.**

Contractor Owner _____ Phone _____

Address _____

Signature _____ SC State License # _____

Approved Denied Approved By: _____

PAID: CASH CHECK-CHECK# _____

RECEIVED BY: _____

DATE: _____