



# Commercial Building Permit Application

## Checklist for All Applications

A complete application shall include the following information. Please initial to signify that the requested information has been provided.

	Applicant Initials	Staff Initials
A copy of this Checklist, completed by the applicant.	<input type="checkbox"/>	<input type="checkbox"/>
A completed and signed Permit Application Form.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Construction Documents</b> (No paper. Construction plans should be submitted in a single PDF that contains all documents. Large sets may be divided by discipline.)	<input type="checkbox"/>	<input type="checkbox"/>
List of documents provided in digital construction documents (submittal list)	<input type="checkbox"/>	<input type="checkbox"/>
<b>Contractor Qualifications Form and Checklist</b> If Contractor is unknown at time of application initial here: _____	<input type="checkbox"/>	<input type="checkbox"/>
(The following information is required for New Construction and Additions)		
<b>Site Plan</b> (IBC Section 107.2.6)	<input type="checkbox"/>	<input type="checkbox"/>
<b>Statement of Special Inspections</b> (IBC Chapter 17, Section 1704.2.3)	<input type="checkbox"/>	<input type="checkbox"/>
<b>Geotechnical report</b> (IBC Chapter 18, Section 1803.6)	<input type="checkbox"/>	<input type="checkbox"/>
(The following is required for buildings containing an automatic Fire Sprinkler System)		
<b>Fire Sprinkler System Specification Sheet (FSSSS)</b>	<input type="checkbox"/>	<input type="checkbox"/>

<i>For staff use only</i>	
Date received (MM/DD/YY): ____/____/____	By: _____



# Commercial Building Permit Application

## 1. Applicant Information

Name	
Company (if applicable)	
Address (street, city, state, zip)	
Phone	Email

## 2. Property Information/Location of Proposed Work

Address (street, city, state, zip)		Unit/Suite
Tax Map Reference Number(s)		Is the property owned by a State Agency? <input type="checkbox"/> Yes <input type="checkbox"/> No

## 3. Zoning Information

Current use/tenant/business name		Proposed use/tenant/business name	
Front setback	2 <sup>nd</sup> front setback	Side setback	Rear setback
Building Height - current	Building height - proposed	Number of stories - current	Number of stories - proposed

## 4. Property Status

Pursuant to S.C. Code § 6-29-1145, is this tract or parcel restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity described in this permit?  Yes     No

## 5. Project Description

Provide a **detailed** description of the proposed work.



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## 6. Type of Work

Select all that apply

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> <b>New Building</b>                  | <input type="checkbox"/> <b>Existing Building</b>        | <input type="checkbox"/> <b>Full Building Demolition</b> |
| <input type="checkbox"/> Multifamily<br>(apartment/townhouse) | <input type="checkbox"/> Addition to existing building   | <input type="checkbox"/> <b>Parking Lot</b>              |
| <input type="checkbox"/> New Mixed use                        | <input type="checkbox"/> Exterior renovations only       | <input type="checkbox"/> <b>Retaining Wall</b>           |
| <input type="checkbox"/> New Shell building                   | <input type="checkbox"/> Interior & exterior renovations | <input type="checkbox"/> <b>Fence over 7' tall</b>       |
| <input type="checkbox"/> Modular/Prebuilt structure           | <input type="checkbox"/> Interior upfit only             | <input type="checkbox"/> <b>Swimming pool</b>            |
| <input type="checkbox"/> Foundation only                      | <input type="checkbox"/> Interior demolition only        | <input type="checkbox"/> <b>Construction Trailer</b>     |
|   |  | <input type="checkbox"/> <b>Other:</b> _____             |

## 7. Use and Occupancy

Select proposed Use and Occupancy. See IBC Chapter 3 for more information:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> <b>Assembly:</b>    | <input type="checkbox"/> <b>Factory and Industrial:</b> | <input type="checkbox"/> <b>Mercantile:</b>   | <input type="checkbox"/> <b>Residential:</b>              |
| <input type="checkbox"/> A-1                 | <input type="checkbox"/> F-1                            | <input type="checkbox"/> M                    | <input type="checkbox"/> R-1                              |
| <input type="checkbox"/> A-2                 | <input type="checkbox"/> F-2                            | <input type="checkbox"/> <b>Institutional</b> | <input type="checkbox"/> R-2                              |
| <input type="checkbox"/> A-3                 | <input type="checkbox"/> <b>High Hazard:</b>            | <input type="checkbox"/> I-1                  | <input type="checkbox"/> R-3                              |
| <input type="checkbox"/> A-4                 | <input type="checkbox"/> H-1                            | <input type="checkbox"/> I-2                  | <input type="checkbox"/> R-4                              |
| <input type="checkbox"/> A-5                 | <input type="checkbox"/> H-2                            | <input type="checkbox"/> I-3                  | <input type="checkbox"/> <b>Storage:</b>                  |
| <input type="checkbox"/> <b>Business:</b>    | <input type="checkbox"/> H-3                            | <input type="checkbox"/> I-4                  | <input type="checkbox"/> S-1                              |
| <input type="checkbox"/> B                   | <input type="checkbox"/> H-4                            |   | <input type="checkbox"/> S-2                              |
| <input type="checkbox"/> <b>Educational:</b> | <input type="checkbox"/> H-5                            |   | <input type="checkbox"/> <b>Utility and Miscellaneous</b> |
| <input type="checkbox"/> E                   |   |   | <input type="checkbox"/> U                                |

## 8. Valuation

(Submit executed contract with contractor qualifications form.)

Total expected project valuation: \_\_\_\_\_

## 9. Signature

It is understood and agreed by the undersigned that the approval of this application does not constitute a privilege to violate Building Code, Zoning Ordinance, or other Ordinances of the City of Columbia, and that any omission or misrepresentation of fact with or without intention of the undersigned, or any alteration or change from this application without approval of the Building Official shall constitute sufficient grounds for the revocation of any permit issued which was based on the approval of this application.	
Signature of Applicant	
Print Name	Date