



**SUMTER CITY-COUNTY
BUILDING INSPECTION DEPARTMENT
POST OFFICE BOX 1449 12 WEST LIBERTY STREET
SUMTER, SC 29151 (803) 774-1600**



MOVING PERMIT APPLICATION

Permit Number _____ **Jurisdiction** City County Mayesville Pinewood

Applicant _____

Name _____ Phone _____

Applicant's Address _____

Street _____ City _____ State _____ Zip _____

Owner _____

Name _____ Phone _____

Owner's Address _____

Street _____ City _____ State _____ Zip _____

Contractor _____

Name _____ Phone _____

Contractor's Address _____

Street _____ City _____ State _____ Zip _____

Contractor's License # _____ **Project Address** _____

Moving Structure From: (Property Address) _____ **Subdivision** _____

General Location _____ **Lot Information:** Interior Lot Corner Lot

Number of Existing Buildings _____ **Number of Existing Accessory Buildings** _____

Moving Structure To: (Property Address) _____ **Subdivision** _____

General Location _____ **Lot Information:** Interior Lot Corner Lot

Number of Existing Buildings _____ **Number of Existing Accessory Buildings** _____

Structure Information: Proposed Use Residential Commercial

Occupancy

<input type="checkbox"/> Assembly	<input type="checkbox"/> Business	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Storage
<input type="checkbox"/> Hazardous	<input type="checkbox"/> Educational	<input type="checkbox"/> Institutional	<input type="checkbox"/> Hotel
<input type="checkbox"/> Industrial	<input type="checkbox"/> Apartment	<input type="checkbox"/> Single Family	<input type="checkbox"/> Duplex
<input type="checkbox"/> Factory	<input type="checkbox"/> Other _____		

Construction Type Wood Frame Steel Frame Brick Block Other _____

Exterior Brick Vaneer Brick Wood Concrete Block Stucco
 Stone Metal Glass Other _____

Roofing Asphalt Fiberglass Slate Built-up Metal Roll Other _____

Type of Heat Hot Air Steam Hot Water Floor Furnace Radiator Space
 Electric Heat Pump Fireplace

Type of Fuel Wood Coal Electric Oil Gas Solar

Utilities Well & Septic Public Water Public Sewer
 Septic Community Water Community Sewer

Plumbing # Full Baths _____ # Half Baths _____ # Restrooms _____ Ceramic Other

Misc. Residential Basement Carport Garage Central A/C
_____ # Stories _____ # Rooms _____ # Units _____ # Fireplaces

Application Completed by: Agent **or** Owner

Note: The Acceptance of this application for review and the payment of fees does **not** constitute the approval of this application. Approval is granted only upon the receipt of a permit. **THIS APPLICATION IS NOT A PERMIT.**
The above statements and accompanying material are complete and accurate

Print Name

Signature

Date

OFFICE USE ONLY:

Permit Fee _____ **Zoning District** _____

Tax Map Number _____ **SIC Code** _____

Approved Lot Yes No **TAZ** _____

Lot Size _____ **Max. Height** _____

Minimum Setbacks Front _____ Rear _____

Side (E) _____ Side (I) _____

Street Right-of Way _____

Flood Hazard Area Yes No Base Flood Elevation _____

Overlay District HP/CBD APZ DNL NA (Noise Attenuation) Swan Lake RCD None

Cross Street Info. Between _____ and _____ Street

Comments Must comply with SC State Highway Rules and Regulations

Planning Official: _____ **Building Official:** _____