



# NEW RESIDENTIAL PERMIT APPLICATION

BUSINESS AND DEVELOPMENT SERVICES  
P.O. BOX 249 – 5 EAST BUTLER ROAD  
MAULDIN \* SOUTH CAROLINA 29662  
(864)234-3475 / (864)234-3484  
[WWW.CITYOFMAULDIN.ORG](http://WWW.CITYOFMAULDIN.ORG)

**IN ORDER TO PROCESS, APPLICATION MUST BE COMPLETED IN ITS ENTIRETY.**

APPLICATION SUBMITTAL DATE: _____	OFFICE USE	FACILITATOR INITIALS
BUILDING PERMIT #: _____	<input type="checkbox"/> B <input type="checkbox"/> F <input type="checkbox"/> Z <input type="checkbox"/> FLOOD <input type="checkbox"/> PW	_____

<b>PROJECT LOCATION</b>	PARCEL ID # / TAX PARCEL #: _____
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**FOR ASSISTANCE COMPLETING THIS SECTION GO TO: [WWW.GREENVILLECOUNTY.ORG](http://WWW.GREENVILLECOUNTY.ORG) (Real Property Services)**

Zoning District:	Property Acres:	Subdivision Name:		
Street Address:	Lot #:	City:	State:	Zip:
Property Owner Name:			New Owner: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing Address:		City:	State:	Zip:
Phone Number: ( ) -			Owner Email:	

<b>BUILDING PERMIT</b>	<b>Plans Required:</b> Three (3) Sets of 8-1/2 x 11 Scaled Sketch Plans of the Site or Copy of Survey <b>NOTE: REFER TO SAMPLE RESIDENTIAL SITE PLAN HANDOUT</b>
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<input type="checkbox"/> Single-Family Attached <input type="checkbox"/> Single-Family Detached	<b>Construction:</b> <input type="checkbox"/> Site Built <input type="checkbox"/> Modular
<b>Type of Foundation:</b> <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Crawl Space	<b>Soil Type:</b> <input type="checkbox"/> Fill <input type="checkbox"/> Undisturbed
<b>Demolition:</b> <input type="checkbox"/> None <input type="checkbox"/> Structural <input type="checkbox"/> Non-Structural	
<b>DHEC APPROVAL:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>NEW CONSTRUCTION:</b> Heated Square Feet	Unheated Square Feet	= Total Square Feet:	(Per Unit)
<b>Number of Units:</b> (Per Building)	<b># of Stories:</b>	<b># of Bedrooms:</b>	<b># of Baths:</b>
<input type="checkbox"/> Basement    Finished Basement: <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Heating Source:</b> <input type="checkbox"/> Electric <input type="checkbox"/> Gas	<b>Utility Company:</b> <input type="checkbox"/> Duke Energy <input type="checkbox"/> Laurens Electric		
<b>Sewer:</b>	Water Meter Size:	<input type="checkbox"/> City of Mauldin <input type="checkbox"/> Metro	<input type="checkbox"/> Re-Wa Paid at City <input type="checkbox"/> Re-Wa (Paid at Re-Wa) Receipt Required

<b>DESCRIBE WORK IN DETAIL:</b>

<b>GENERAL CONTRACTOR INFORMATION</b>	State License (LLR) #: _____
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Business Name:	DBA:	Business Phone Number: ( ) -		
Mailing Address:	City:	State:	Zip:	
Contact Name:	Email:	Mobile Phone: ( ) -		

OVER

## PERMITS REQUESTED

Permits Requested	Contractor Business Name	State License #	Cost of Construction	Permit Fees	Business License Upgrade (if applicable)
<input type="checkbox"/> Building			\$	\$	\$
<input type="checkbox"/> Electrical			\$	\$	
<input type="checkbox"/> Mechanical			\$	\$	
<input type="checkbox"/> Plumbing			\$	\$	
<input type="checkbox"/> Zoning				\$	
Total Project Cost			\$		
Facilitator Notes:			Total Permit Fee	\$	\$
			<b>Information below is to be completed by facilitator</b>		
			Mauldin Sewer	\$	
			Re-Wa (if applicable)	\$	
			BL Upgrade (if applicable)	\$	
			Total Fee	\$	

## SIGNATURES

By signing this application I hereby certify that I am the owner or an authorized agent of the owner or company performing work stated above. I further certify that all information in this application is correct and that all work will comply with the South Carolina State Building Code and all other applicable state and local laws. I understand that if any information provided is found to be incorrect or falsely stated that this permit will be null and void and that I may be responsible for violation of other related laws and local ordinances. The Business and Development Services Department will be notified of any changes in the approved plans or specifications for the project as permitted.

Applicant: - Printed Name: _____	Title: _____	Company Name: _____
Signature: _____	Phone Number: (   )   -	Email Address: _____

