

PERMIT # \_\_\_\_\_

# CITY OF FLORENCE BUILDING PERMIT

FEE \$ \_\_\_\_\_

REC # \_\_\_\_\_

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

Owner-Name, Address, Telephone: \_\_\_\_\_  
\_\_\_\_\_

Contractor-Name, Address, Telephone: \_\_\_\_\_  
\_\_\_\_\_

Architect or designer-Name, Address, Telephone: \_\_\_\_\_  
\_\_\_\_\_

Use of Building: Commercial \_\_\_\_\_ Residential \_\_\_\_\_ Other \_\_\_\_\_

Describe Work: New Construction \_\_\_\_\_ Remodeling \_\_\_\_\_

Valuation of Work: \$ \_\_\_\_\_ Heated Square Footage \_\_\_\_\_

Number of Buildings: \_\_\_\_\_ E-mail: \_\_\_\_\_

Number of Units, if Residential: \_\_\_\_\_ Fax: \_\_\_\_\_

Power Provider: \_\_\_\_\_ Entergy \_\_\_\_\_ Southern Pine

If this project falls within the floodplain, a certificate of elevation must be furnished.

*Permit holder shall protect adjoining properties, including streets, from construction site runoff with approved erosion, sediment and stormwater control measures.*

Plans Checked by: \_\_\_\_\_

Approved for Issuance by: \_\_\_\_\_

*THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED FOR A PERIOD OF 180 DAYS ANY TIME AFTER WORK IS COMMENCED.*

*I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTOOD THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISION OF ANY STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.*

\_\_\_\_\_  
Signature of Contractor or Authorized Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner (If Owner is Builder)

\_\_\_\_\_  
Date