

ANDERSON COUNTY BUILDING PERMIT APPLICATION (COMMERCIAL/INDUSTRIAL)

MAP: _____ PARCEL: _____ AC/LOT: _____ ZONE: _____

ROAD NAME/ E-911 ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PROPERTY OWNER: _____

DESCRIPTION OF USE: _____

HOME PHONE: _____ WORK PHONE: _____

CONTRACTOR: _____ STATE CONTRACTOR LIC#: _____

ADDRESS: _____ PHONE: _____

I, THE UNDERSIGNED, SWEAR/AFFIRM THAT I PROPOSE USE/CONSTRUCTION AS STIPULATED IN MY APPLICATION, DRAWINGS, & SPECIFICATIONS; I WILL COMPLY FULLY WITH ALL APPLICABLE LAWS & REGULATIONS, WHETHER SPECIFIED HEREIN OR NOT.

SIGNATURE: (CONTRACTOR/AGENT/ PROPERTY OWNER) DATE

TAKEN BY: _____ DATE: _____

SITE PLAN REVIEW:

APPROVED BY ANDERSON COUNTY REGIONAL PLANNING COMMISSION ON _____

PLANS REVIEW:

TYPE OF CONST: I II III IV VA VB OCCUPANCY GROUP: _____

OCCUPANCY DESCRIPTION (for building valuation): _____ COST/SF: \$ _____ (from ICC Building Valuation Data)

STRUCTURE AREA: _____ sf X \$ _____ /sf = \$ _____ fee from chart \$ _____

REQUIRED NUMBER OF INSPECTIONS: _____ X (\$30) \$ _____

TOTAL PERMIT FEE: \$ _____

REVIEWED FOR CODE COMPLIANCE BY: _____ DATE: _____

RESUBMITTAL OF CORRECTED PLANS REQUIRED: YES NO PLANS CORRECTED: YES NO N/A

STATE FIRE MARSHALL REVIEW RECEIVED: YES NO N/A

REQUIREMENTS:

- A. TWO SETS OF PLANS _____
- B. SITE PLAN (signed by applicant) _____
- C. SEPTIC TANK PERMIT (if required) _____ 865-425-8777
- D. E-911 ADDRESS CERTIFICATION _____ 865-463-6852
- E. READY FOR REVIEW: _____ DATE _____

PAYMENT:

CASH: _____ PERMIT # _____

CHECK: _____