



SUMTER CITY-COUNTY PLANNING COMMISSION

POST OFFICE BOX 1449
SUMTER, SC 29151

12 WEST LIBERTY STREET
(803) 774-1600



DEMOLITION PERMIT APPLICATION

Permit Number _____ Jurisdiction [] City [] County [] Pinewood [] Mayesville

Applicant Name _____ Phone _____ E-mail Address _____

Applicant's Address Street _____ City _____ State _____ Zip _____

Property Owner Name _____ Phone _____

Owner's Address Street _____ City _____ State _____ Zip _____

Contractor Name _____ Phone _____ E-mail Address _____

Contractor's Address Street _____ City _____ State _____ Zip _____

Contractor's License # _____ Demo Property Address _____

Tax Map # _____ Type of Building Use [] Residential [] Commercial [] Other

of Stories _____ Height _____ Area (Sq. Ft.) _____ Total Contract Price \$ _____

Construction Type [] Wood Frame [] Steel Frame [] Brick [] Block [] Other _____

Exterior [] Brick Veneer [] Brick [] Wood [] Concrete Block [] Stone [] Other _____
[] Metal [] Glass [] Stucco

Roofing [] Wood Shingle [] Asphalt [] Fiberglass [] Roll [] Slate [] Other _____
[] Metal [] Built-Up

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

Hazardous Material [] None [] Asbestos [] Other _____

Description of Building to be Demolished _____
Manner of Debris Disposal _____

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:

Tax Map Number _____ **Zoning District** _____

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

Comments MUST COMPLY WITH SC HAZ MAT REMOVAL POLICY.

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