



City of Mullins
 Building Department
 151 East Front Street
 Mullins, SC 29574
 843-464-9583

Trades Permit Application

Form
 TR-2022-07

Part I	General Info					
	1. Nature of Use: <input type="checkbox"/> Commercial <input type="checkbox"/> Residential					
	2. Nature of Work: <input type="checkbox"/> New Installation <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair-Renovation					
	3. Project Address/Location:			Project Title:		
	Legal Description: <i>(Lot, Block, Subdivision Name & Map Number)</i>					
	Existing Use:		Proposed Use:			
	Contract Amount or Value of Finished Work (Material & Labor) \$					
	Water Supply: <input type="checkbox"/> Public system <input type="checkbox"/> Private well		Sewage Disposal: <input type="checkbox"/> Public system <input type="checkbox"/> Private (DHEC approved)			
	Description of Work:					
	4. Notice of Violation -Have you received a notice or been in contact with any Codes Enforcement Department personnel regarding a possible violation at this site? <input type="checkbox"/> YES <input type="checkbox"/> NO					
Part II	Flood Zone					
	Flood Zone: Yes <input type="checkbox"/> No <input type="checkbox"/> Zone Type: A <input type="checkbox"/> AE <input type="checkbox"/> AH <input type="checkbox"/> AO <input type="checkbox"/> AR <input type="checkbox"/> A99 <input type="checkbox"/> V <input type="checkbox"/> VE <input type="checkbox"/> X <input type="checkbox"/>					
	If the project address is in the flood zone, an elevation certificate may be required before a permit can be issued.					
	Owner/Tenant/Lessee Info					
	5. Property Owner/Lessee Tenant Name: <i>Check one</i> <input type="checkbox"/> Owner <input type="checkbox"/> Lessee or Tenant Telephone: Fax:					
	Address:		City:	State:	Zip Code:	E-Mail Address:
	6. Applicant Name: <i>Check one</i> <input type="checkbox"/> Property Owner <input type="checkbox"/> Authorized Agent of Property Owner					
			Telephone:	Fax:		
	Address:		City:	State:	Zip Code:	E-Mail Address:
	Contractor Info					
7. Contractor Name:						
		Telephone:	Fax:			
Address:		City:	State:	Zip Code:	E-Mail Address:	
State License No.:		License Class:				
I understand the following:						
1. All subcontractors are required to be properly licensed or registered in accordance with state law.						
2. The permit card must be posted in a conspicuous place on the premises and a means of personnel toilet facilities provided on site.						
3. Permit is void if work is not started within six months from date of issuance. Permit is void if work is abandoned for a six month period.						
4. The undersigned owner or agent understands that the approval of this application does not constitute a privilege to violate any applicable government ordinances, codes, or laws and that any omission of or misrepresentation of fact with or without intention of the undersigned or any alteration or change from this application shall constitute grounds for the revocation of any permit issued which was based on the approval of this application.						
5. Do you wish for copies of all activities for this permit to be forwarded to the owner or occupant of record? _____						

Contractor's Or Owner's Signature			Date			

Part III	Trade(s)		
	Plumbing Permit, If applicable \$10.00 Base Fee/+ \$2.50 Each additional Fixture		
	<input type="checkbox"/> Water Closets	<input type="checkbox"/> Drinking Fountains	<input type="checkbox"/> Laundry Tray
	<input type="checkbox"/> Urinals	<input type="checkbox"/> Dental Units	<input type="checkbox"/> Soda Fountain
	<input type="checkbox"/> Lavatories	<input type="checkbox"/> Floor Drains	<input type="checkbox"/> Grease/Oil Interceptor
	<input type="checkbox"/> Bathtubs/Showers	<input type="checkbox"/> Backflow Devices	<input type="checkbox"/> Vacuum Breakers
<input type="checkbox"/> Dishwasher	<input type="checkbox"/> Kitchen Sink	<input type="checkbox"/> Water Heaters	
<input type="checkbox"/> Mop Sinks	<input type="checkbox"/> Garbage Disposal	<input type="checkbox"/> Washing Machine	
Total from fixture count: \$ _____			
Add base permit fee : \$10.00			
Zoning fee if applicable: \$25.00			
Total permit fee due: \$ _____ Cash <input type="checkbox"/> Check <input type="checkbox"/> # _____			
Electrical Permit, If applicable \$10.00 Base Fee			
<input type="checkbox"/> Meter SVC 0-400 Amps (+\$10.00)	<input type="checkbox"/> Electrical Devices (+\$0.30 each)		
<input type="checkbox"/> Electrical Appliances (\$4.00)	<input type="checkbox"/> Service Pole (\$20.00)		
<input type="checkbox"/> Signs (+\$10.00 each)	<input type="checkbox"/> Wall Signs (+\$10.00 each)		
<input type="checkbox"/> Meter SVC 0-400 Amps (+\$20.00)	<input type="checkbox"/> Heat Strips (+\$4.00)		
<input type="checkbox"/> Generator(s) (+\$15.00 each)	<input type="checkbox"/> A/C Outlet (+\$20.00 each)		
<input type="checkbox"/> Motors/Transformers (+\$5.00 each)	<input type="checkbox"/> Other(s) (+\$15.00 each)		
Total from fixture count: \$ _____			
Add base permit fee : \$10.00			
Zoning fee if applicable: \$25.00			
Total permit fee due: \$ _____ Cash <input type="checkbox"/> Check <input type="checkbox"/> # _____			
Mechanical Permit, If applicable Base Fee \$20.00 (Residential) --- \$30.00 (Commercial)			
<input type="checkbox"/> Ton (\$5.00 per .5 Ton >1	<input type="checkbox"/> Boilers	<input type="checkbox"/> Hood System	
<input type="checkbox"/> KW Package Units	<input type="checkbox"/> Clothes Dryer	<input type="checkbox"/> Other _____	
<input type="checkbox"/> AC Unit	<input type="checkbox"/> Ventilation Fans		
	<input type="checkbox"/> Range Hoods		
Total from fixture count: \$ _____			
Add base permit fee : \$10.00			
Zoning fee if applicable: \$25.00			
Total permit fee due: \$ _____ Cash <input type="checkbox"/> Check <input type="checkbox"/> # _____			
Gas Permit, If applicable \$10.00 Base Fee			
<input type="checkbox"/> Gas Logs (+\$1.00 each)	<input type="checkbox"/> Furnace Boilers (+\$5.00 each)		
<input type="checkbox"/> Clothes Dryer (\$1.00)	<input type="checkbox"/> Wall Heaters (\$2.50 each)		
<input type="checkbox"/> Misc. Outlets (+\$1.00 each)	<input type="checkbox"/> Space Heaters (+2.50 each)		
<input type="checkbox"/> Gas Pack (+\$5.00 per 1/2 ton)	<input type="checkbox"/> Other _____ (+\$5.00)		
<input type="checkbox"/> Wall Furnace (+\$2.50 each)			
Total from fixture count: \$ _____			
Add base permit fee : \$10.00			
Zoning fee if applicable: \$25.00			
Total permit fee due: \$ _____ Cash <input type="checkbox"/> Check <input type="checkbox"/> # _____			
Pool Permit, If applicable \$10.00 Base Fee			
<input type="checkbox"/> Total Floor Area _____	<input type="checkbox"/> Enclosed/Covered? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Heated? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Materials: <input type="checkbox"/> Gunitite <input type="checkbox"/> Vinyl <input type="checkbox"/> Fiberglass <input type="checkbox"/> Other _____			
Total permit fee due: \$ _____ Cash <input type="checkbox"/> Check <input type="checkbox"/> # _____			
Fire Sprinkler Permit, If applicable \$10.00 Base Fee			
System Type: <input type="checkbox"/> Water <input type="checkbox"/> Foam <input type="checkbox"/> Other _____		Number of Sprinkler Heads _____	
Total permit fee due: \$ _____ Cash <input type="checkbox"/> Check <input type="checkbox"/> # _____			
Staff Use Only			
Date	Permit Number	Permit Amount	
Zoning Approval	Zoning Jurisdiction	Zoning District	
FHM (Flood)	Plan Examination	Fire Department	
"The South Carolina Contractor's Licensing Act requires plumbing installations to be performed by licensed contractors". Work performed on projects is exempt from this requirement only for the following reasons:			
1. The work is not on a R-3 project and does not exceed \$5000.00 or			
2. The work is an R-3 and does not exceed \$5000.00 and the contractor is properly registered with SCLLR.			