

231 E. Hayne Street PO Box 1389 Woodruff, SC 29388 864-476-8154

## SWIMMING POOL PERMIT APPLICATION



Department of Building Safety 4795 South Church St. Ext. - Suite 2 Roebuck, SC 29376 864-586-6111

PLEASE DIRECT ANY QUESTIONS TO BEKKI PHILLIPS (RPHILLIPS@CITYOFWOODRUFF.COM) OR CALL 864-476-8154
PROOF OF ID MUST BE SUBMITTED WITH APPLICATION

CONTRACTORS: MUST HAVE A CITY BUSINESS LICENSE PRIOR TO APPLYING FOR PERMIT (\*A) MUST PROVIDE COPY OF SIGNED CONTRACT CONTAINING DOLLAR AMOUNT FOR SCOPE OF WORK

OF	FICE USE ONLY:		-			
APPLICATION SUBMITTAL DATE:	RESIDENTIAL			FA	ACILITATOR'S INITIAI	
PERMIT NUMBER(S):	COMMERCIAL			_		
DESCRIPTION OF WORK:						
LOCATION INFORMATION	N:					
IN GROUND POO	L ABOVE GROUND	POOL OTH	HER (hot tub, etc.)	)	_	
RESIDENTIAL PROJECT: - ca	omplete this section	PARCEL ID #:				
PROPERTY OWNER'S NAME:			PROPE	RTY OWI	NER'S PHONE #:	
PROPERTY OWNER'S MAILING ADDRESS:		CITY:	s	TATE:	ZIP:	
NSTALLATION STREET ADDRESS:		CITY:	s	TATE:	ZIP:	
PROPERTY OWNER'S EMAIL ADDRESS:						
COMMERCIAL PROJECT: - Complete this section		PARCEL ID #:				
PROPERTY OWNER'S NAME:		<u> </u>	PROPE	RTY OWI )	NER'S PHONE #:	
NAME OF BUSINESS/LESSEE:		SHOPPING CENTER	R / DEVELOPMENT NA	AME:		
BUSINESS MAILING ADDRESS:		CITY:	s	TATE:	ZIP:	
NSTALLATION STREET ADDRESS:		CITY:	S	TATE:	ZIP:	
PROPERTY OWNER'S EMAIL ADDRESS:						

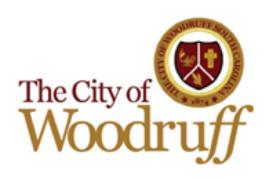
CONTRACTOR/INSTALLER CONTACT INFORMATION: FF3F7>;57@E7/>>D6°,						
BUSINESS NAME:		D/B/A:				
BUSINESS MAILING ADDRESS:		CITY:		STATE:	ZIP:	
BUSINESS CONTACT'S NAME:			BUSI (	L NESS PHONE )	#: -	
BUSINESS CONTACT'S EMAIL ADDRESS:			BUSI (	NESS CONTA )	CT'S PHONE #:	
LICENSED ELECTRICIAN: - ***	MUST PROVIDE A COP	Y OF LICENS	SE ***			
NAME OF ELECTRICIAN:			EF3	F7>;5 <b>7</b> @E	7/>>Dfi°,	
ELECTRICIAN'S EMAIL ADDRESS:			ELECTRICIAN'S PHONE #: ( ) -			
(*A) CONTRACT AMOUNT:	\$	Do you hav Yes, #:	ve a current business lic		No	
CONTRACTORS: YOU MUST PURCHASE A C	CITY BUSINESS LICENS	E IN ORDEI	R TO OBTAIN A PI	RMIT AN	D CONDUCT WORK.	
Pool Fence or Barrier Agreement is required to process this permit.  Temporary construction barrier must be installed after excavation.  Permanent fence/barrier must be installed prior to final inspection.  Submit full set of construction documents with application for commercial projects.  To schedule an inspection, please contact CC&I Services, LLC at 864-586-6111 Ext. 3 or email permits@cciservicesllc.com. Inspections must be scheduled by 4:00pm for next business day inspections.						
PERMIT RENEWAL &/or UPDATE FEE \$53.00 per each renewal.  IN THE EVENT OF A REQUEST FOR CANCELLATIO REFUND OF A PERMIT, IF GRANTED, THE MINIMU						
PERMIT FEE (residential/ commercial) WILL BE NONREFUNDABLE. ALL PERMITS EXPIRE 6 MONTHS (180 days) AFTER ISSUANCE OR LAST INSPECTION. ONCE A PERMIT EXPIRES, ALL FEES ARE NON-REFUNDABLE, INCLU	T		L BE ADDED TO ALL CR	·		

THE MININMUM FEE.

SIGNATURE:					
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 Department Of Building Safety shall be notified of any changes in the approved plans of specifications for the project as permitted.  All work shall comply with Ordinances and International Codes. I certify the information given on this application is true and correct.					
APPLICANT'S NAME (printed):	COMPANY NAME:	TITLE:			
APPLICANT'S EMAIL ADDRESS:		APPLICANT'S PHONE #: ( ) -			
APPLICANT'S SIGNATURE:					

PERMIT REQUESTS RECEIVED AFTER 4:00pm WILL BE PROCESSED THE NEXT BUSINESS DAY

PLEASE CLICK THE SUBMIT BUTTON TO SEND YOUR COMPLETED APPLICATION AND ATTACH ALL REQUESTED DOCUMENTS





## POOL FENCE OR BARRIER AGREEMENT

As the owner of the property located at		,						
I am aware of, and have received a copy of the requirements for the enclosure of a pool in accordance with Section 3109 of the International Building Code which has been adopted by the City of Woodruff, SC.								
I take full responsibility, as the property owner, for ensuring that the pool fence or barrier is installed around the pool or spa during and after construction. Also, that the pool or spa will not be filled with water until either a temporary fence or barrier is installed around the pool or spa.								
I further agree and acknowledge that a Final II installation of a permanent barrier is installed a		til the						
(Owner's Printed Name)	(Owner's Phone Number)	(Owner's Phone Number)						
(Owner's Signature)	(Date)							
	SWORN TO before me this	dav						
	of, 20							
		_ (SEAL)						
	Notary Public for South	Carolina						
	My Commission Expires:							

City of Woodruff 231 E. Hayne Street PO Box 1389 Woodruff, SC 29388 864-476-8154

Page 1 of 1

CC&I Services, LLC Department of Building Safety 4795 S. Church St. Ext. – Suite 2 Roebuck, SC 29376 864-586-6111