



City of Inman  
 20 S. Main Street  
 Inman, SC 29349  
 864-472-6200

# COMMERCIAL PLAN REVIEW APPLICATION



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

**PLANS MUST INCLUDE A CODE ANALYSIS**

**FOR PLAN REVIEW:**

Submit two (2) sets of site plans, construction drawings and specifications.  
 In addition to these, a digital copy of all described above should be included.  
 Digital copies may be hand delivered or emailed to the following email addresses:  
 dkuykendall@cciservicesllc.com or lhendric@cciservicesllc.com

**OFFICE USE ONLY:**

APPLICATION SUBMITTAL DATE: \_\_\_\_\_

FACILITATOR'S INITIAL

PLAN REVIEW #: \_\_\_\_\_ FEE: \$ \_\_\_\_\_

\_\_\_\_\_

## DESCRIPTION OF WORK:


## TYPE OF WORK (check all that apply):

TYPE OF CONSTRUCTION:

New Construction \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_ Repair \_\_\_\_\_ Interior Demolition \_\_\_\_\_

TOTAL SQUARE FOOTAGE:

TYPE OF OCCUPANCY:

DOES THE BUILDING HAVE:

A Sprinkler System?

A Fire Alarm System? (not a burglar alarm)

A Fire Suppression System/Hood?

YES \_\_\_\_\_ NO \_\_\_\_\_

YES \_\_\_\_\_ NO \_\_\_\_\_

YES \_\_\_\_\_ NO \_\_\_\_\_

## PROJECT INFORMATION:

PARCEL ID #:

PROJECT NAME:

PROJECT STREET ADDRESS:

STE:

CITY:

STATE:

ZIP:

PROJECT COSTS:

## PROPERTY OWNER'S INFORMATION:

PROPERTY OWNER'S NAME:

PROPERTY OWNER'S PHONE # WITH AREA:  
 CODE:

PROPERTY OWNER'S MAILING ADDRESS:

CITY:

STATE:

ZIP:

PROPERTY OWNER'S EMAIL ADDRESS:

<b>CONTRACTOR CONTACT INFORMATION:</b>	<b>STATE LICENSE (LLR) #:</b>
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BUSINESS NAME:	D/B/A:		
BUSINESS MAILING ADDRESS:	CITY:	STATE:	ZIP:
BUSINESS CONTACT'S NAME:	BUSINESS PHONE # WITH AREA CODE:		
BUSINESS CONTACT'S EMAIL ADDRESS:	BUSINESS CONTACT'S PHONE # WITH AREA CODE:		
PROPERTY OWNER'S NAME:	PROPERTY OWNER'S PHONE # WITH AREA CODE:		

<b>DESIGNER OF RECORD:</b>	NAME OF DESIGNER:
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DESIGNER'S EMAIL ADDRESS:	DESIGNER'S PHONE # WITH AREA CODE:
WHO SHOULD THE PLAN REVIEWER CONTACT WITH QUESTIONS:	
CONTACT'S EMAIL ADDRESS:	CONTACT'S PHONE #: WITH AREA CODE:
WHO SHOULD RECEIVE PLAN REVIEW COMMENTS:	
CONTACT'S EMAIL ADDRESS:	CONTACT'S PHONE # WITH AREA CODE:

<b>PROJECT DESIGNERS OF RECORD:</b>
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OWNER:	PLUMBING:
ARCHITECTURAL:	MECHANICAL:
STRUCTURAL:	FIRE PROTECTION:
ELECTRICAL:	SITE WORK:

**City of Inman**  
**BUILDING CODES FEE SCHEDULE - EFFECTIVE December 5, 2019**  
 For information on how to apply and calculate residential/commercial fees please click on the link: [www.cciservicesllc.com/inmanbuildingsafety](http://www.cciservicesllc.com/inmanbuildingsafety) Table 1 BVD Chart

**A 3% CONVENIENCE FEE WILL BE ADDED TO ALL CREDIT/DEBIT CARD PAYMENTS.**

**THERE WILL BE A \$30.00 SERVICE FEE ON ALL RETURNED CHECKS.**

**COMMERCIAL PLAN REVIEW FEE..... = 1/2 OF THE PERMIT FEE COST (Use attached BVD Chart)**

<b>SIGNATURE:</b>
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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 or 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 # WITH AREA CODE:
APPLICANT'S SIGNATURE:		



Applicants will be required to complete the Certification Cost Form (*included with the permit application*). Permit fees will be calculated based on the Certified Construction Cost subject to minimum.

**IMPORTANT POINTS:**

The BVD (Building Valuation Data) Chart is not intended to apply to alterations or interior up fits to existing buildings.

The square foot construction cost does not include the price of the property on which the building is built.

The data represents a national average and must be modified using the ***South Carolina Regional Cost Modifier*** 0.85.

The Plan Review Fee is based on ½ of all permit fee cost(s).

**Example:**

- New Retail Store (***Mercantile***)
- Type of Construction – VB unprotected
- Occupancy Group – Mercantile
- Square Footage of 22,655

Using the BVD Chart, find Group M (***Mercantile***) in the left-hand column and follow across to the Type of Construction VB to find the minimum cost per sq. ft. (square foot) for a Mercantile Occupancy and Construction type.

VB = \$93.50 per sq. ft.

$\$93.50 \text{ per sq. ft.} \times 0.85 \text{ (SC Modifier)} = \$79.48 \times 22655 = \$1,800,619.80$  (calculated valuation)

Using the calculated valuation of \$1,800,619.80, round to the nearest 1000<sup>th</sup> = \$1,801,000.00

1. Deduct each Sub Contractor's Cost(s) from the Calculated Valuation.
2. The remaining Calculated Valuation will be the General Contractor's cost(s).
3. Using the Building Codes Fee Schedule Table 2, calculate all fees (building, plumbing, electrical & mechanical, etc.)
4. The Plan Review Fee will be ½ of all permit fee.

# BUILDING VALUATION DATA CHART

Square Foot Construction Costs <sup>a, b, c, d</sup>

Group (2018 International Building Code)	IA	IB	IIA	IIB	IIIA	IIIB	IV	VA	VB
A-1 Assembly, theaters, with stage	239.41	231.54	226.03	216.67	203.74	197.86	209.82	186.11	179.13
A-1 Assembly, theaters, without stage	219.07	211.20	205.68	196.33	183.65	177.76	189.48	166.01	159.03
A-2 Assembly, nightclubs	188.23	182.77	178.14	170.93	161.13	156.68	164.92	145.88	140.94
A-2 Assembly, restaurants, bars, banquet halls	187.23	181.77	176.14	169.93	159.13	155.68	163.92	143.88	139.94
A-3 Assembly, churches	220.05	212.18	206.66	197.31	185.99	180.11	190.46	168.36	161.38
A-3 Assembly, general, community halls, libraries, museums	185.05	177.18	170.67	162.31	148.58	143.75	155.46	131.00	125.02
A-4 Assembly, arenas	218.07	210.20	203.68	195.33	181.65	176.76	188.48	164.01	158.03
B Business	192.02	185.04	179.30	170.56	155.93	150.11	164.01	137.00	131.05
E Educational	197.52	190.73	185.77	177.32	165.32	156.97	171.23	144.39	140.26
F-1 Factory and industrial, moderate hazard	114.08	108.82	102.59	98.59	88.51	84.45	94.44	74.21	69.43
F-2 Factory and industrial, low hazard	113.08	107.82	102.59	97.59	88.51	83.45	93.44	74.21	68.43
H-1 High Hazard, explosives	106.73	101.48	96.25	91.25	82.38	77.32	87.10	68.08	N.P.
H234 High Hazard	106.73	101.48	96.25	91.25	82.38	77.32	87.10	68.08	62.30
H-5 HPM	192.02	185.04	179.30	170.56	155.93	150.11	164.01	137.00	131.05
I-1 Institutional, supervised environment	191.30	184.81	179.46	171.90	158.36	154.06	171.99	141.86	137.45
I-2 Institutional, hospitals	321.25	314.27	308.52	299.78	284.17	N.P.	293.24	265.24	N.P.
I-2 Institutional, nursing homes	222.99	216.01	210.27	201.52	187.89	N.P.	194.98	168.96	N.P.
I-3 Institutional, restrained	218.28	211.30	205.55	196.81	183.43	176.62	190.27	164.50	156.55
I-4 Institutional, day care facilities	191.30	184.81	179.46	171.90	158.36	154.06	171.99	141.86	137.45
M Mercantile	140.27	134.81	129.18	122.96	112.68	109.23	116.95	97.44	93.50
R-1 Residential, hotels	193.08	186.60	181.24	173.68	159.89	155.58	173.77	143.39	138.97
R-2 Residential, multiple family	161.95	155.46	150.10	142.54	129.52	125.22	142.64	113.02	108.61
R-3 Residential, one- and two-family <sup>d</sup>	151.10	146.99	143.20	139.61	134.50	130.95	137.27	125.85	118.45
R-4 Residential, care/assisted living facilities	191.30	184.81	179.46	171.90	158.36	154.06	171.99	141.86	137.45
S-1 Storage, moderate hazard	105.73	100.48	94.25	90.25	80.38	76.32	86.10	66.08	61.30
S-2 Storage, low hazard	104.73	99.48	94.25	89.25	80.38	75.32	85.10	66.08	60.30
U Utility, miscellaneous	83.66	79.00	74.06	70.37	63.47	59.32	67.24	50.19	47.80

a. private garages use Utility, miscellaneous    b. for shell only buildings deduct 20 percent  
c. N.P. = not permitted    d. unfinished basements (Group R-3) = \$21.00 per sq. ft.

(per square foot) X 0.85 (SC Modifier) = \_\_\_\_\_ X \_\_\_\_\_ (square footage)

= \_\_\_\_\_ (calculated valuation)

- \_\_\_\_\_ (sub contractor's costs)

= \_\_\_\_\_ (total)