



Guidelines for Plan Review and Permits Community Development Department City of Gaffney, SC Effective Date: September 28, 2018

1. PLAN REVIEW

- A plan review is required on any new structure, major remodel, or “change of occupancy” classification. A plan review is also required on most land disturbance activities. Please contact our office (864-487-8500) for additional plan submittal/review requirements or questions.
- If plans submitted for review involve properties located in the Historic Preservation Overlay District (HPOD), then a Certificate of Appropriateness application may be needed as well. The application will be reviewed by the Zoning Administrator and/or the Architectural Review Board on a case-by-case basis, and the review may require additional time and information.
- The plan review fee is half the cost of a building permit and/or land disturbance permit and is figured on the entire cost of the undertaking. The plan review fee shall be paid at the time of plan submittal; the technical review will not begin until the fees are paid and all appropriate information has been submitted.
- Typical plan review time is ten (10) working days. Applicant will be notified by the City in writing upon completion of plan review. A resubmittal fee may be required on any plans that must be submitted more than twice. This fee will be determined by the City on a case-by-case basis.
- A plan review is valid for six (6) months after the date of the City’s response letter. After six months the review comments may be voided (and the process must begin again) if the City has not received revised plans or issued the applicable permits.
- Land disturbance activities typically require plan review/approval/permitting, regardless of the size of structure (if any). Additional requirements for land disturbance activities are addressed in the City’s Stormwater Management Policy. This policy is available upon request.
- For all projects involving structures over 5,000 square feet or more, or classified as Assembly, Educational, or Institutional, please submit five (5) sets of plans signed and sealed by a properly licensed design professional, or four (4) paper sets and one (1) electronic (PDF) version.
- For all structure additions, renovations, remodeling, or new construction projects involving less than 5,000 square feet which are not classified as Assembly, Educational, or Institutional, please submit five (5) sets of plans, or four (4) paper sets and one (1) electronic (PDF) version.

- For One and Two Family Residential structures, please submit two (2) sets of plans or narrative scope of work with detailed information such as: site plan that shows parcel lines and structures, width and depth of footing, lumber spans and o/c spacing, pier spacing, type of siding, use of structure, etc. ***NOTE: A string may be required to be pulled along the property line for setback verification.***

2. APPLICABLE CODES

2015 – International Residential Code with SC modifications
 2015 – International Building Code with SC modifications
 2015 – International Plumbing Code with SC modifications
 2015 – International Mechanical Code with SC modifications
 2015 – International Fuel/Gas Code with SC modifications
 2015 – International Fire Code with SC modifications
 2009 – South Carolina Energy Conservation Code
 2015 – International Existing Building Code
 2015 – International Property Maintenance Code
 2014 – National Electrical Code (NFPA 70)
 2017 – ICC/ANSI A117.1 Code

3. PERMITS

- Permits are required for most projects. However, no permit is required if the work is under a designated dollar amount and no inspection is required on the project. Please contact our office to determine whether a permit is required for the project before beginning work.
- The cost of a permit will be doubled if the permit is obtained after work has commenced without approval from the Community Development Department.
- A moving permit is required on any structure that is moved onto or removed from a city lot. A manufactured home will need a moving permit, as well as any building or other permits needed to properly install the home before a Certificate of Occupancy will be issued.
- A demolition permit is required for any structure that will be demolished. A letter from SCDHEC concerning asbestos and lead paint must accompany the permit application for any commercial project. A commercial project includes any structure (even a house) being torn down for a commercial purpose.
- A fire suppression system (mechanical hood) located within a building will be issued a mechanical permit. Outside, underground suppression piping will be issued a plumbing permit.
- A freestanding pylon sign, or any sign over ten feet tall, requires a building permit. Additional sign regulations are addressed in the City's Zoning Ordinance.
- A properly issued permit is valid as long as work on the project is being actively performed. A permit becomes void after 180 days of inactivity on the project.

4. ADDRESS

Address numbers shall be established or verified prior to any issuance of a permit.

5. FEES

The City's fee schedule for plan review and permits is available upon request.

PLAN REVIEW APPLICATION

APPLICANT INFORMATION

Applicant/Company Name _____		
Mailing Address _____	Suite/Unit No. _____	
City _____	State _____	Zip _____
Phone (____) _____	Fax (____) _____	Cell (____) _____

PROJECT INFORMATION - Will any EXTERIOR work be done? YES NO

Project Name/Name of Business _____		
Cost \$ _____	Tax Parcel No. _____	
Address _____	Suite/Unit No. _____	
<input type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Tenant Build-out
Are There Any Deed Covenant/Restrictions That Limit This Type Of Activity? <input type="checkbox"/> Yes <input type="checkbox"/> No		

PROJECT DESIGNERS

Architect _____	Mechanical _____
Structural _____	Fire Protection _____
Electrical _____	Civil _____
Plumbing _____	Other _____

YEAR OF REFERENCED CODES

IBC _____	IFGC _____	IRC _____
IECC _____	NEC _____	IEBC _____
IPC _____	IMC _____	IFC _____
ICC/ANSI A117.1 _____		

FOR OFFICE USE ONLY

DATE APPLICATION SUBMITTED: _____ REC'D BY: _____

FEE SUBMITTED: _____ CHECK# _____ CASH _____ CREDIT _____ DATE: _____

FEE RECEIVED BY: _____

PLAN REVIEW APPLICATION

COMMERCIAL PROJECT DETAILS:

Type of Construction _____ Building Height: _____ feet Number of Stories _____

Mezzanine: YES NO Basement: YES NO

Gross Building Area: Existing _____ (sq. ft.) New _____ (sq. ft.) Subtotal _____ (sq. ft.)

Is a DHEC approved site plan being submitted? YES NO

Is an approved Encroachment Permit being submitted? YES NO

What type of business will the building be used for? (Please be VERY specific, i.e., retail, nail salon, daycare, etc.) _____

What is the total number of parking spaces provided? _____ Dimensions: _____

What is the total number of handicapped spaces provided? _____ Dimensions: _____

Does the building have a sprinkler system? YES NO Type of system: NFPA 13 13R 13D

Does the building have a standpipe? YES NO Class of system: I II III WET DRY

Does the building have a fire pump? YES NO If yes, is it new or existing? _____

Does the building have an elevator? YES NO

Fire Alarm includes the following number of devices:

____ Smoke Detectors ____ Heat Detectors ____ Duct Detectors ____ Pull Stations

____ A/V Devices ____ Water Flow ____ Tamper Switches

List Other: _____

Building Occupancy _____ Primary Occupancy _____ Secondary Occupancy _____

Net sq. ft. per occupancy _____ Gross sq. ft. per occupancy _____

Mixed Occupancy: YES NO Separation: _____ Hr. Exception: _____

Total occupant load of building: _____

Applicant Representative

Representative's Signature

Date

BUILDING PERMIT APPLICATION

CITY OF GAFFNEY

(864) 487-8500

APPLICANT INFORMATION

Company Name _____	Contact Person _____
Address _____	Suite/Unit _____
City/State/Zip _____	Phone (____) _____ Fax (____) _____
SC State License No. _____	Exp. Date _____

PROJECT INFORMATION - Will any EXTERIOR work be done? ___ YES ___ NO

Project Address _____	Suite/Unit _____
Project/Subdivision Name _____	Tax Parcel No. _____
Property Owner _____	Zoning _____ Cost of Job _____
Brief Description of Work _____	
Are There Any Deed Covenants/Restrictions That Limit This Type Of Activity? <input type="checkbox"/> Yes <input type="checkbox"/> No	

PERMIT INFORMATION

Permit Type: <input type="checkbox"/> Residential <input type="checkbox"/> Mobile Home <input type="checkbox"/> Commercial <input type="checkbox"/> Multi-family <input type="checkbox"/> Other _____
Type of Work: <input type="checkbox"/> New Addition <input type="checkbox"/> Interior Upfit <input type="checkbox"/> Remodel <input type="checkbox"/> Shell/White Box <input type="checkbox"/> Other _____
Project Size (sq. ft.): Heated _____ Unheated _____ Basement _____ # Stories _____ Elevation _____ ft.
NOTE: A string may be required to be pulled along the property line for setback verification.

BUILDING PERMIT FEES

<u>Total Valuation</u>	<u>Fee</u>
Issuing Permit	\$25.00 (for permits under \$1,000 but requiring inspection)
\$1,000 to \$49,999	\$25.00 for the first \$1,000.00 plus \$5.00 for each additional thousand or fraction thereof.
\$50,000 to \$99,999	\$275.00 for the first \$50,000.00 plus \$4.00 for each additional thousand or fraction thereof.
\$100,000 to \$499,999	\$475.00 for the first \$100,000.00 plus \$3.00 for each additional thousand or fraction thereof.
\$500,000 and up	\$1,675.00 for the first \$500,000.00 plus \$2.00 for each additional thousand or fraction thereof.

NOTE: The fee is doubled when a permit is not obtained prior to commencement of work.

Total Fee Due: \$ _____

The undersigned hereby certifies that he/she is either the owner or the authorized agent of the owner and hereby makes application for permit and inspection of work described and agrees to comply with all applicable laws regulating the work.

SIGNATURE: _____ **DATE:** _____

ELECTRICAL PERMIT APPLICATION
CITY OF GAFFNEY
(864) 487-8500

APPLICANT INFORMATION

Company Name _____	Contact Person _____
Address _____	City/State/Zip _____
Phone (____) _____	Fax (____) _____
SC State License No. _____	Exp. Date _____
General Contractor (if applicable) _____	

PROPERTY INFORMATION

Address _____	Suite/Unit _____	Tax Parcel No: _____
Property Owner _____	Description of work _____	
Cost of job _____	Size of service in amps: _____	
The property is: <input type="checkbox"/> Residential <input type="checkbox"/> Mobile Home <input type="checkbox"/> Commercial <input type="checkbox"/> Multi-family <input type="checkbox"/> Other _____		

ELECTRICAL PERMIT FEES

1.	Issuing permit	\$25.00	_____
2.	Plus the following when provided:		
	Services:		
	Residence by amp.	\$0.15 per amp.	_____
	Commercial by amp.	\$0.20 per amp.	_____
	Branch circuits (for each branch circuit over current device)	Residential	Commercial
	Per pole	\$1.25	\$1.75
3.	Temporary power pole	\$25.00	_____
	Total Fee Due:		_____

No fee or permit is required if project cost is less than \$200.00 and no inspection is required.

NOTE: The fee is doubled when a permit is not obtained prior to commencement of work.

Signature

Date

PLUMBING PERMIT APPLICATION
CITY OF GAFFNEY
(864) 487-8500

APPLICANT INFORMATION

Company Name _____	Contact Person _____
Address _____	City/State/Zip _____
Phone (____) _____	Fax (____) _____
SC State License No. _____	Exp. Date _____
General Contractor (if applicable) _____	

PROPERTY INFORMATION

Address _____	Suite/Unit _____	Tax Parcel No: _____
Property Owner _____	Description of work _____	
Cost of job _____		
The property is: <input type="checkbox"/> Residential <input type="checkbox"/> Mobile Home <input type="checkbox"/> Commercial <input type="checkbox"/> Multi-family <input type="checkbox"/> Other _____		

PLUMBING PERMIT FEES

1.	Issuing permit	\$25.00	
2.	<i>Plus the following when provided:</i>		
	For each plumbing fixture, floor drain or trap (including water and drainage pipe)	\$4.00	_____
	For each sewer pipe having to be replaced, repaired or new	\$5.00	_____
	For each cesspool, septic tank and seepage pit or drainfield	\$7.50	_____
	For each water heater	\$4.00	_____
	For repair or alteration of drainage, vent or supply piping	\$5.00	_____
	Lawn sprinkler system or pool	\$10.00	_____
	Underground Fire Suppression	\$10.00	_____

Total Fee Due: _____

No fee or permit is required if project cost is less than \$200.00 and no inspection is required.

Note: The fee is doubled when a permit is not obtained prior to commencement of work.

Signature

Date

MECHANICAL PERMIT APPLICATION

CITY OF GAFFNEY

(864) 487-8500

APPLICANT INFORMATION

Company Name _____	Contact Person _____
Address _____	City/State/Zip _____
Phone (____) _____	Fax (____) _____
SC State License No. _____	Exp. Date _____
General Contractor (if applicable) _____	

PROJECT INFORMATION - Will any EXTERIOR work be done? ___ YES ___ NO

Address _____	Suite/Unit _____	Tax Parcel No: _____
Property Owner _____	Description of work _____	
Cost of job _____		
The work consists of: New Installation () Additional or repair ()		
The property is: <input type="checkbox"/> Residential <input type="checkbox"/> Mobile Home <input type="checkbox"/> Commercial <input type="checkbox"/> Multi-family <input type="checkbox"/> Other _____		

MECHANICAL PERMIT FEES

Total Valuation	Fee
Issuing Permit	\$25.00
\$1,000 to \$49,999	\$25.00 for the first \$1,000.00 plus \$5.00 for each additional thousand or fraction thereof.
\$50,000 to \$99,999	\$275.00 for the first \$50,000.00 plus \$4.00 for each additional thousand or fraction thereof.
\$100,000 to \$499,999	\$475.00 for the first \$100,000.00 plus \$3.00 for each additional thousand or fraction thereof.
\$500,000 and up	\$1,675.00 for the first \$500,000.00 plus \$2.00 for each additional thousand or fraction thereof.

Total Fee Due: _____

No fee or permit is required if project cost is less than \$200.00 and no inspection is required.

NOTE: The fee is doubled when a permit is not obtained prior to commencement of work.

Signature

Date

ZONING REVIEW APPLICATION
CITY OF GAFFNEY
(864) 487-8500

- 1) NAME OF APPLICANT _____
- 2) APPLICANT'S MAILING ADDRESS _____

- 3) APPLICANT'S PHONE # _____
- 4) REPRESENTATIVE OF APPLICANT _____
- 5) REPRESENTATIVE'S MAILING ADDRESS _____

- 6) REPRESENTATIVE'S PHONE # _____
- 7) STREET ADDRESS OF SUBJECT PROPERTY _____
- 8) NEARBY REFERENCE POINTS TO PROPERTY _____
- 9) SUBJECT PROPERTY'S TAX ID # _____
- 10) ZONING DISTRICT _____
- 11) EXISTING USE OF PROPERTY _____
- 12) PROPOSED USE OF PROPERTY _____

Submit a site plan showing dimensions of parcel; size, height, location of all structures, fencing, etc: parking; access points; buffers, landscaping and any other information deemed necessary by the community development department to complete this review.

NOTE: A string may be required to be pulled along the property line for setback verification.

The undersigned does hereby verify that they are the applicant thereof and accepts responsibility for accuracy and gives the City of Gaffney permission to obtain whatever information is necessary to review this application.

NAME OF APPLICANT/ AGENT

DATE

FOR OFFICE USE ONLY

DATE APPLICATION SUBMITTED _____ REC'D BY _____

DATE APPLICATION COMPLETED _____ REVIEWED BY _____

DATE OF COMP'D REVIEW _____ STATUS OF REVIEW _____

**GRADING/LAND DISTURBANCE
ACTIVITIES APPLICATION
CITY OF GAFFNEY
(864) 487-8500**

SECTION 1

- Date of Application: _____
- Applicant's Name: _____
- Applicant's Mailing Address: _____
- Applicant's Phone Number: _____
- Project Name: _____
- Tax Map Number: Sheet _____ Block: _____ Lot: _____
- Address/Location of Project: _____
- Estimated Cost of Project: _____
- Nature of Work: _____

- Latitude: _____ Longitude: _____
- Total Acreage of Site: _____ Number of Disturbed Acres: _____
- Anticipated Start Date: _____ Anticipated Completion Date: _____
- Nearest receiving waterbody: _____
- Distance to nearest receiving waterbody: _____
- Is property within a Flood Zone? YES _____ NO _____
If YES, list Classification _____ and FIRM Panel Number _____
- Are there any freshwater wetlands located on the property? YES _____ NO _____
If YES, have the wetlands been delineated? YES _____ NO _____
- Are any wetlands being impacted by the project? YES _____ NO _____
- Is this part of a larger common plan for development or sale? YES _____ NO _____
- Will adjacent properties and utilities be protected during and after operation? (i.e. shoring, erosion control, stormwater system) YES _____ NO _____
- Are site plans included with this application, showing existing conditions, proposed conditions, proper stormwater management and erosion control methods, etc.?
YES _____ NO _____

SECTION 2

A.) Property owner of record: _____
 Address of owner: _____
 Phone (day): _____ (mobile) _____

B.) Person financially responsible for the land disturbing activity, if different from above: _____
 Address: _____
 Phone (day): _____ (mobile) _____

C.) Agent or Contact person (IF APPLICABLE): _____
 Address: _____
 Phone (day): _____ (mobile) _____

D.) Engineer, Technical representative or firm (IF APPLICABLE): _____
 Address: _____
 Phone (day): _____ (mobile) _____

E.) Contractor or operator (if known): _____
 Address: _____
 Phone (day): _____ (mobile) _____

PERMIT FEES

<u>Total Valuation</u>	<u>Fee</u>
Issuing Permit	\$25.00 (for permits under \$1,000 but requiring inspection)
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\$100,000 to \$499,999	\$475.00 for the first \$100,000.00 plus \$3.00 for each additional thousand or fraction thereof.
\$500,000 and up	\$1,675.00 for the first \$500,000.00 plus \$2.00 for each additional thousand or fraction thereof.

NOTE: The fee is doubled when a permit is not obtained prior to commencement of work.

SECTION 3

I hereby certify that all land disturbing activities and associated work pertaining to this site shall be accomplished pursuant to and in keeping with the terms and conditions of the approved plans. I also certify that a responsible person will be assigned to the project for day-to-day control. I certify under penalty of law that this document and all attachment were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

PRINT NAME
OWNER/PERSON FINANCIALLY RESPONSIBLE

SIGNATURE
OWNER/PERSON FINANCIALLY RESPONSIBLE

Request for New Street Address
CITY OF GAFFNEY
(864) 487-8500

Date: _____

Property Owner: _____

Phone Number: _____ Cell Phone: _____

Owner's Current Mailing Address: _____

Please provide the following information about the property:

1) Property Tax Map #: _____

2) Is this: (Check all that apply)

- an undeveloped lot with no known address
- an existing building with no known address
- the site of new construction
- the result of a property that is being subdivided
- a single family dwelling
- a multiple family dwelling
- a business with only one address
- one structure with multiple tenants and/or suites
- other (please describe) _____

3) Please submit a site plan, and building plan if multiple suites, depicting the location of the property in reference to nearby properties and/or landmarks, and the size, shape, and street frontage of the property.

4) The undersigned hereby certifies that he/she is the owner or the authorized agent of the owner, and that the information provided is accurate.

Signature: _____

FOR OFFICE USE ONLY

ZONING DISTRICT: _____ PROPOSED USE: _____

ZONING OFFICIAL: _____ DATE: _____

*NEW ASSIGNED ADDRESS: _____

ASSIGNED BY: _____ DATE: _____

*The applicant will be notified in writing to the mailing address listed above of the newly created address and of any regulations regarding the posting of the address at the property.

