

CITY OF NEWBERRY

P.O. Box 538 - 1330 College St.

Newberry, SC 29108

803-321-1019

803-321-2609 FAX

MECHANICAL PERMIT APPLICATION

DATE _____

Street Address: _____

Owner/Business Name: _____

Address (if different from above): _____

Use: Residential _____ Commercial _____

Cost of job (Contract Amount): \$ _____

Brief description of job: _____

CONTRACTOR: _____

Address: _____

Phone: _____ Cell: _____ Fax: _____

Email: _____

State License Number: _____ State License Classification: _____

By signing this application, I certify that I am an authorized agent for the Company performing the work stated above and that all information provided is true. I further 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 violations of other related state laws and local ordinances.

Contact Name: _____

Signed: _____ Date: _____

RESIDENTIAL PROPERTY OWNERS DOING THEIR OWN WORK: Homeowner exemption form must be completed and Disclosure Statement filed with the county register of deeds. All persons hired to perform work must be properly licensed by the SC Department of LLR and have a current City of Newberry business license. Violation of any part of this agreement shall void all permits.

Signed: Property Owner: _____ Phone: _____