

**Planning & Development Dept. – Permit Application Center**

P.O. Box 11706, or 155 Johnston Street, Rock Hill, SC 29731-1706

Phone: 803-329-5590 Fax: 803-329-7228

www.cityofrockhill.com



**CONSTRUCTION TRAILER PERMIT**

\$50

**Checklist - Submit the following information with your permit application:**

- Floor plan of trailer (indicating whether or not a bathroom will present), dimensions of trailer.
- Provide tie-down, step and landing details.
- If a bathroom is present and not tying into an existing sanitary sewer line, a letter is needed from the waste disposal vendor stating the frequency the holding container will be emptied.
- Site plan indicating location of temporary structure and setbacks from all property lines.
- If located off the construction site, a temporary use permit is also required.

**Permit Application**

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Construction Address: \_\_\_\_\_ Subdivision: \_\_\_\_\_ Lot # \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone: \_\_\_\_\_ State Lic # \_\_\_\_\_

Contractor Address: \_\_\_\_\_ BL # \_\_\_\_\_

Description of Work: \_\_\_\_\_

City Utilities to be Connected to Trailer:  Water  Sewer  Electric

Heated/Conditioned Sq. Ft. \_\_\_\_\_ Unheated Sq. Ft. \_\_\_\_\_ # Baths: \_\_\_\_\_

**List Subcontractors if Applicable:**

Electrical Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_ State Lic # \_\_\_\_\_

Electrical Contractor Address: \_\_\_\_\_ City Bus Lic # \_\_\_\_\_

Mechanical Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_ State Lic # \_\_\_\_\_

Mechanical Contractor Address: \_\_\_\_\_ City Bus Lic # \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_ State Lic # \_\_\_\_\_

Plumbing Contractor Address: \_\_\_\_\_ City Bus Lic # \_\_\_\_\_

Gas Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_ State Lic # \_\_\_\_\_

Gas Contractor Address: \_\_\_\_\_ City Bus Lic # \_\_\_\_\_

Is this property located in a flood zone? \_\_\_\_\_ If yes, what is the flood zone classification? \_\_\_\_\_

**Certification**

I certify to the best of my knowledge that all information provided herein is true and correct and all work performed under this permit shall conform to the plans and specifications herewith submitted and to the City Building Code and all Laws and Ordinances pertaining thereto. I understand that I must use a contractor licensed or registered with the State of South Carolina. I certify no construction or portion of construction will be built over or under any electrical, water, sewer, storm water or any other utility easements or rights-of-way.

I also certify that I will remove this trailer within 30 days after construction activities have concluded.

Applicant Signature: \_\_\_\_\_ Applicant Title: \_\_\_\_\_

(Contractor, Owner, Agent, etc.)

Applicant Printed Name: \_\_\_\_\_

Sworn to and subscribed before me on

this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

Signature of Notary: \_\_\_\_\_

(Place Notarial Seal Here)

Notary Public for: \_\_\_\_\_

My commission expires: \_\_\_\_\_

**OFFICE USE ONLY**

Approved By: \_\_\_\_\_  Disapproved By: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_