



# CHEROKEE COUNTY

Building Safety  
110 Railroad Avenue  
Gaffney, SC 29340  
Office # 864-487- 2561 Fax # 864-902-1100

**ELECTRICAL, MECHANICAL, PLUMBING,  
PERMIT APPLICATION**

Permit Number \_\_\_\_\_

Owner or Renter \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

## CONTRACTOR

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_

Phone \_\_\_\_\_

License# \_\_\_\_\_

License Expiration Date: \_\_\_\_\_

## DESCRIPTION OF WORK

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Power Company \_\_\_\_\_ Gas Company \_\_\_\_\_

Project Cost \_\_\_\_\_

Permit Cost \_\_\_\_\_ Check \_\_\_\_\_ Cash \_\_\_\_\_ CC Type \_\_\_\_\_

The undersigned hereby certifies that the above information is true and correct.  
Permit holder is to comply with all County, State, and Federal laws and Ordinances.

Signature \_\_\_\_\_

Date \_\_\_\_\_