

**APPLICATION FOR PERMIT  
BUILDING, DEMOLITION, MOVING, INSTALLING**

Town of Blacksburg 105 S. Shelby St. Blacksburg, SC 29702  
864-839-2332 Fax 864-839-3663

Date \_\_\_\_\_

Address of Work \_\_\_\_\_

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

Type of Work New construction \_\_\_ Addition \_\_\_ Repair \_\_\_ Demo \_\_\_ Moving \_\_\_ Other \_\_\_\_\_

Square footage \_\_\_\_\_ Expected Timeframe \_\_\_\_\_ Project cost \$ \_\_\_\_\_

Tax Map # \_\_\_\_\_ Zoning \_\_\_\_\_ Business License # \_\_\_\_\_

Company Name _____	Contact Person _____
Address _____	
Phone _____	
Property Owner _____	
Property Address _____	
Phone _____	email _____

**Administrative Fees**

Residential \$25.00 \_\_\_\_\_ Commercial \$50.00 \_\_\_\_\_ TBD Project type \_\_\_\_\_

All events requiring a permit within the Town of Blacksburg Town limits must obtain a permit and business license from Administration to operate. Any issues arising from projects within the TOB town limits are subject to revocation of this permit. This permit is valid up to 180 days.

I certify and attest the information to be truthful to best of my knowledge and will abide all Town ordinances and laws as such.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Administrative Review \_\_\_\_\_ Date \_\_\_\_\_

**\*All inspections will be completed by Cherokee County\***

townofblacksburg.com

