

## Sample Permit Review Checklist

(Developed by the South Carolina Department of Natural Resources)

Building Permit Number: \_\_\_\_\_

Applicant's Name:	Owner's Name:
Site Address, Tax #, Parcel #:	Address:
Telephone:	Telephone:

**I. All development - Base Flood Elevation Data provided.**

- A. The as-built Elevation Certification from a registered land surveyor or professional engineer has been submitted?  Yes  No
- B. The lowest floor elevation is at or above the required lowest floor elevation?  Yes  No
- C. Electrical, heating, ventilation, plumbing, air conditioning equipment (including duct work), and other service facilities are located above BFE or floodproofed?  Yes  No

**II. Development in Zones A, AE, A1-A30, and AH.**

- A. *Solid foundation perimeter walls located below BFE:*  Yes  No
  - 1. There are at least two (2) openings? \_\_\_\_\_
  - 2. Square footage of enclosed area subject to flooding \_\_\_\_\_
  - 3. Square inches of venting required \_\_\_\_\_
  - 4. Square inches per opening (multiply l by w) \_\_\_\_\_
  - 5. Number of required vents (3 above divided by 4 above) \_\_\_\_\_
  - 6. Foundation contains the minimum number of vents?  Yes  No
  - 7. The bottom of each opening is no higher than one (1) foot above grade?  Yes  No
  - 8. Any cover on openings will permit the automatic flow of floodwaters in both directions?  Yes  No
  
- B. *Base Flood Elevation and/or floodway data not available or AO Zones:*
  - 1. The lowest floor is at least three (3) feet above the highest adjacent grade?  Yes  No
  - 2. The development meets the setback requirements of the ordinance?  Yes  No
  - 3. If 2 above was "no", has a No-Rise Certification been submitted?  Yes  No  
 Reviewer's Name: \_\_\_\_\_ Date reviewed: \_\_\_\_\_
  
- C. *Floodway data are provided.*
  - 1. Did this development encroach in the floodway?  Yes  No
  - 2. Do the actual field conditions meet the proposed actions and technical data requirements?  Yes  No
  - 3. If C1 was "yes", has a No-Rise Certification been submitted?  Yes  No  
 Reviewer's Name: \_\_\_\_\_ Date reviewed: \_\_\_\_\_

Local Administrator's Signature: \_\_\_\_\_ Date : \_\_\_\_\_