

Hakim Bayyoud

Director

Lonnie Hamilton, III Public Services Building
4045 Bridge View Drive, Room A311
North Charleston, SC 29405-7464



BUILDING INSPECTION SERVICES

Administration

843.202.6940

Fax: 843.202.6954

Inspections and Contractor Licensing

843.202.6930

Fax: 843.202.6936

CHARLESTON COUNTY CONTRACTOR RENEWAL

THE FOLLOWING CHARLESTON COUNTY CONTRACTORS LICENSE WILL EXPIRE ON JAN 31

Please Check the License(s) you are renewing:

_____ GENERAL CONTRACTOR

_____ MECHANICAL HVAC

_____ COMMERCIAL SPECIALTY

_____ COUNTY CONTRACTOR

_____ MECHANICAL ELECTRICAL

_____ MECHANICAL PLUMBING

_____ SIGN CONTRACTOR

_____ JOURNEYMAN (\$25)

TO RENEW BY MAIL:

NAME / COMPANY ON COUNTY CONTRACTOR LICENSE: _____

SOUTH CAROLINA CONTRACTORS LICENSE NUMBER: _____

CURRENT MAILING ADDRESS: _____

CURRENT PHONE NUMBER: _____

CURRENT E-MAIL ADDRESS: _____

COUNTY VEHICLE DECAL NUMBER: _____

CHARLESTON COUNTY CONTRACTOR LICENSE FEE: \$50.00 EACH LICENSE: _____

REPLACEMENT VEHICLE DECALS (ONE COMPLETE SET): \$ 6.00 EACH VEHICLE: _____

RENEWAL VEHICLE DECALS (YEAR STICKER ONLY): \$ 3.00 EACH VEHICLE: _____

TOTAL AMOUNT INCLUDED: _____

***INCLUDE A COPY OF YOUR CURRENT SC STATE LICENSE* *Please send an authorization letter for anyone other than the qualifying party to pull permits or the qualifying party will be the only person authorized to pull permits.* Email to buildingservices@charlestoncounty.org**

MAKE CHECKS PAYABLE TO: CHARLESTON COUNTY BUILDING INSPECTION SERVICES & MAIL COMPLETED FORM WITH CHECK TO:

CHARLESTON COUNTY BUILDING INSPECTION SERVICES 4045 BRIDGE VIEW DR., ROOM A311
NORTH CHARLESTON, SC 29405-7464

PRINTED NAME: _____

QUALIFIER SIGNATURE: _____

