EMERGENCY MASTER APPLICATION
COMMUNITY DEVELOPMENT DEPARTMENT
DO NOT FILL IN GREY AREAS

Permit # _____

Fee: $_____

Project Address	Street number:	Street Name:	*Flood Zone:*

Lot:	Subdivision:_____ Place Name:_____	Zoning District: Overlay District:

Parcel ID# **R** _____ / _____ / _____ / _____

Bldg: Unit:

Property Owner	Applicant: Authorized Tenant or Leaseholder
Name:	Name
Address:	Address
Phone:	Phone:
EMAIL:	EMAIL:

Contractor	Primary Contact
Name:	Name:
Address:	Address:
EMAIL:	EMAIL:
Phone:	Phone:
Contractor License/registration #:	Phone:
HHI Business License #:	

Architect	Engineer
Name:	Name:
Phone:	Phone:
State License # :	State License #
HHI Business License #:	HHI Business License #:

PLANNING DIVISION

Single Family/Duplex

- ☐ Emergency Permitting Affidavit
- ☐ Photos of site layout (entire property- i.e. front, back & side yards)
- ☐ Building Elevations **-OR-** Photos of four sides of each building

For Damage Equal to or Greater Than 50%

- ☐ As-Built Survey **–OR-** Other Approved Documentation
- ☐ Emergency Permitting Affidavit
- ☐ Three Sets of Building Plans
- ☐ Four Complete Site Plans

Other *(i.e. Commercial, Industrial, Multi-Family)*

- ☐ Emergency Permitting Affidavit
- ☐ DPR Approval & Plans **–OR-** As-Built Survey
- ☐ DRB Approval & Plans **–OR-** Building Elevations **-OR-** Photos of four sides of each building

For Damage Equal to or Greater Than 50%

- ☐ 4 Sets of Building Plans & Site Plans

PLANNING DIVISION APPROVAL (IF APPLICABLE)

_____ _____ _____
SIGNATURE   TITLE   DATE

Single Family ☐   **Duplex ☐**   **Detached Garage ☐**   **Accessory ☐**   **Modular Structure ☐**

Manufactured Home ☐   **Multifamily ☐**   **Commercial ☐**

Last Revised 8/5/19

Are there recorded private covenants and/or restrictions that are contrary to, conflict with, or prohibit the proposed request? If so, a copy of the private covenants and/or restrictions must be submitted with this application. ☐YES ☐NO

Is the work that is to be completed to include the building & area of the site that will be disturbed over .5 acres or 21,780 sq. ft.? ☐YES ☐NO

Detailed Description of Work

BUILDING INFORMATION:			
Total Lot Size		Height measured from BFE	
		Maximum Height Allowed**	
Total Pervious (sq ft) for entire lot		Number of Fireplaces	
Total Impervious (sq ft) for entire lot		Type of Exterior Materials	
Heated Sq. Ft. (new or added)		Fire Alarm System	☐YES ☐NO
Unheated Sq. Ft. (new or added)		Sprinklered	☐YES ☐NO
Number of Stories		Type of heating/air	
Number of Bedrooms		Gas appliances	
Number of Bathrooms		Size of Liquid Propane tank	
Total Residential Rooms		Septic Tank Number	
AIR BARRIER TEST - Yes or No - if Yes, need prior to inspection being scheduled		**Blower Door Test – Yes or No – if Yes, need prior to CO OR FINAL inspection being scheduled**	
Number of Elevators		Insulation (Prescriptive or Performance Base)	

POOL INFORMATION		ROOF INFORMATION	
Pool/Spa Sq. Ft. _____	Material:	Wind Uplift:	
Elevation of Pool Deck _____	Amount of Fasteners:	Years of Guarantee:	
Total Pervious:	Type of Fasteners:		
Total Impervious:			

Value of Construction - (includes materials, labor, profit)		
Plumbing	☐	**Town assessed % of damage_____**
Electrical	☐	
Heating/Air	☐	**Total Value of Construction (Plumb/Elec/HVAC/Bldg.)**
Building	☐	**$_____**

Application is hereby made for a permit to perform work as described herein. I understand that emergency permits are only issued to repair or reconstruct a structure back to the state or condition that existed immediately prior to the declared disaster. The information on this application is complete and accurate and I am authorized to submit this application. I understand that all work must be according to approved plans if required and that the repairs cannot exceed the % of assessed damage established by the Town. All work will be in compliance with Town of Hilton Head Island adopted codes.

_____   _____   **Date_____**
Signature of owner or
authorized tenant/authorized agent   *Print Name*

_____   _____   **Date_____**
Signature of Contractor of Record   *Print Name*

Last Revised 8/5/19