TOWN OF SURFSIDE BEACH CODE CLEARANCE FORM

This form is required for all businesses located in the Town limits. You are required to get all of the necessary approvals for Code Compliance before you open your business. This form must be returned to the Business License Office with all approvals.

NAME OF BUSINESS: ___________________________________________________________

TYPE OF BUSINESS: ____________________________________________________________

LOCATION OF BUSINESS: ________________________________________________________

DESCRIBE BUSINESS ACTIVITY: __________________________________________________

TYPE OF BUILDING: _____ STORE____ OFFICE____ WAREHOUSE____ RESTAURANT____ OTHER

ARE SIGNS, ALTERATIONS, REMODELING OR REPAIRS PLANNED? yes_____ no_______

If yes, you are required to obtain permits before any work is started.

NAME OF OWNER: ___________________________ Signature: ____________________________ date: _______

Please obtain approvals in this order.

BUILDING AND ZONING DEPARTMENTS:
Compliance with Zoning Ordinance.
APPROVED
Authorized signature: ____________________________ date: _______
Print Name: ________________________________________________

A New Business Inspection must be performed by the Building Department prior to the business opening.
A $ 75.00 inspection fee is due to set up the inspection.
APPROVED
Authorized signature: ____________________________ date: _______
Print Name: ________________________________________________

HEALTH DEPARTMENT: Compliance with health regulations. Will require DHEC signature. 238-4378
APPROVED
Authorized signature: ____________________________ date: _______
Print Name: ________________________________________________

FIRE DEPARTMENT: Business must be setup, stocked, and ready for business prior to this inspection.
Call Fire Department at 913-6369 to set up inspection. Copy of Inspection sheet required.
APPROVED
Authorized signature: ____________________________ date: _______
Print Name: ________________________________________________

POLICE DEPARTMENT: Complete the Night Reference Form. (Drop it off at Police Station and obtain a signature)
APPROVED
Authorized signature: ____________________________ date: _______
Print Name: ________________________________________________

ZONING DEPARTMENT: SIGNAGE: For all new signs, or changes made to existing signs, you must obtain Zoning approval prior to installation. OVERLAY: yes_____ no_______

APPROVED
Authorized signature: ____________________________ date: _______

NO CHANGE
Applicant signature: ____________________________ date: _______

BUSINESS LICENSE DEPARTMENT:
Notify Public Works of New Business date: _______

Landlord Business License? ____________________________

“No Smoking” Decal given to applicant.

The Town of Surfside Beach has a smoking ordinance that prohibits smoking in public places. Code (Sec 7-131-7-147) Business Licenses are not transferable. You may not conduct business until Code Clearance is completed.

Updated 12/11/13