



Orangeburg County Contractors Representative Form

In an effort to protect licensed contractors and citizens of this jurisdiction from unlawful and unlicensed contractors we have developed this form that will need to be completed on a per job basis. Thank you for your cooperation.

Date: _____

Licenses Holder: _____ Email: _____

License Type: _____ SCLLR#: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

The following person(s) are hereby authorized to act as agents of our company for all matters pertaining to obtaining a permit.

Name: _____ Position: _____

Name: _____ Position: _____

Name: _____ Position: _____

Name: _____ Position: _____

Name: _____ Position: _____

License Holder Signature

Date

On this _____ day of _____, 20____, _____ personally appeared before me _____ and stated that he/she has the authority to act on behalf of the said company/ corporation and acknowledged said instrument to be its voluntary act and deed. Before me:

Notary Public

Seal

My Commission Expires: _____.

Building Inspection Department
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