



CITY OF ANDERSON
BUILDING & CODES DEPARTMENT
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PLAN REVIEW SUBMITTAL

PLAN REVIEW # _____

Today's Date: _____

Time: _____

Job Name: _____

Job Address: _____

Brief Description of Work: _____

(i.e.; tenant up fit, new construction, site plans only)

Residential: _____ Commercial: _____

Contact Name: _____ Contact Phone #: _____

Contact Email Address: _____

Contractor Name: _____ Contractor Phone #: _____

Contractor Email Address: _____

Two paper and one electronic copy are required for all projects. Include plat for all new construction or addition projects.

Current Code Series: 2015 IRC and IBC; 2014 NEC; 2009 ANSI 117.1; 2009 IECC