



South Carolina Department of Labor, Licensing and Regulation
South Carolina Building Codes Council
 110 Centerview Dr • Columbia • SC • 29210
 P.O. Box 11329 • Columbia • SC • 29211-1329
 Phone: 803-896-4688 • contact.bcc@llr.sc.gov • Fax: 803-896-4814
 llr.sc.gov/bcc

MODULAR UNIT SALE AND INSTALLATION INFORMATION

This form is for R-3 occupancy units and is to be submitted before a modular building label can be issued.

I, _____ hereby certify that I am a licensed South Carolina Residential Home Builder, license number _____ or South Carolina General Contractor, license number _____ issued in the name of _____ as appears on my Builders/Contractors License Certificate.

I understand that I am responsible for; obtaining all required building permits, the installation of the foundation, the connection of the unit to the foundation, the connection of all modular sections to each other, the installation of all components provided by the factory (unless noted otherwise on the plans approved and sealed by the SC Building Codes Council), and the completion of all finish work for the modular unit described below.

Sold to, _____ by _____
(Purchaser) (Manufacturer's representative/builder/contractor)

and delivered to _____
(Address where home will be delivered from the manufacturer)

to be initially used for occupancy as a: Residence
 Display Model

Please check the box that applies:

- This is to certify that I, or an employee of my construction business, purchased the modular unit described below.
- The modular unit described below was purchased from the manufacturer's representative by the homeowner.

Manufacturer: _____

BCC Assigned Control Number: _____

Unit Serial Number: _____

Name of Builder/Contractor: _____

Signature of Builder/Contractor: _____ Date: _____

Complete this form, print, sign and submit it with the **Label Request Application**.



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LABEL REQUEST APPLICATION

By completing and submitting this form, the Manufacturer is attesting to the accuracy of the information.

NOTE: Checks must be made payable to *The SC Building Codes Council*

If the unit is residential, please submit the Modular Unit Sale and Installation Information Form on our website.

Manufacturer: _____ SC License No.: _____

Address: _____

Phone No.: _____ Fax No.: _____

Third Party Inspection Agency: _____

Third Party In-plant Inspector: _____

In-plant Inspector's Address: _____

SC File/Approval No.: _____

Request Prepared by: _____ Title: _____ Date: _____

FOR OFFICE USE ONLY	
Date Check Mailed	
Fee Received	
Date Labels Mailed	
Label Number(s)	
Processing Agent	

Model Name or No.	Res. Com.	Serial No.	Total Building Floor Area	No. of Modules	Fee: \$45 per Module
Total fees this order:					\$

(Total fees = no. of modules x \$45.00)

Owner's Name	Destination

LABEL REQUEST APPLICATION INSTRUCTIONS

In an effort to expedite label issuance, the following instructions for completion of the application are provided. Please type or print the information requested as per the following.

- Line (1) Provide the name and South Carolina license number for the manufacturing facility producing the unit(s).
- Line (2) Provide the physical address for the manufacturing facility producing the unit(s).
- Line (3) Provide the area code and telephone number(s) (regular and toll free, if available) and Fax number of the person completing the application.
- Line (4) Provide the name of the approved third party inspection agency that is employed by the manufacturer to perform plans review and in-plant inspection services.
- Line (5) Provide the name of the inspector who is employed by the approved third party inspection agency to perform building inspections at the manufacturing facility.
- Line (6) Provide the mailing address of the third party in-plant inspector. NOTE! All labels are delivered by certified mail to the address shown on this line, therefore, it must be accurate and legible, and, cannot be associated in any way with the manufacturer or its employees.
- Line (7) Provide the SC file/approval number issued by SCLLR.
- Line (8) Provide the (typed or printed) name and title of the person who prepared the application.
- Line (9) Provide the signature of the person who prepared the application and the date of preparation.

Building Information – Provide the model name or number; residential or commercial designation; serial number; floor area of the completed building in square feet (exterior dimensions, all floors); the total number or modules (boxes) for each model; the label fee for each model (\$45.00 x the number of modules).

Owner and Destination Information – Provide the name of the purchaser (must be the consumer or end user) and destination of building (street address, and city of the consumer or end user).

Fee Schedule - \$45 per modular section.