



Zoning Map Amendment Application

Application Instructions:

1. **Meetings with the Planning and Zoning Administrator are required PRIOR to application submittal and are by appointment only.**
2. Submit the application form with owner's signature, legal description, any other supporting documents, and a map with the rezoning areas highlighted.
3. Application Fee: \$250.00
4. Please see attached meeting schedule for meeting dates and deadlines.

Property Location of Proposed Rezoning Request: _____

Existing Zoning Classification: _____ Proposed Zoning Classification: _____

Number of Acres: _____ Tax Map Number: _____

Proposed Use: _____

Name of Property Owner(s): _____

Address of Property Owner(s): _____

Phone Number: _____ Email: _____

Signature(s) of Property Owner: _____

*Name of Applicant (if different than property owner. Acting Agent Authorization Form Required):

Phone Number: _____ Email: _____

Signature of Applicant: _____

Pursuant to the South Carolina Local Government Comprehensive Planning Enabling Act (Section 6-29-1145 of the South Carolina Code of Laws), is this tract or parcel restricted by any recorded covenant, restriction, easement, etc., that is contrary to, conflicts with or prohibits the (proposed) permitted activity? Yes No