



ZONING COMPLIANCE APPLICATION

I certify that all the information on this application and any documentation attached are correct to the best of my knowledge.

Applicant/Owner Name: _____

Property Address: _____

Address: _____

Signature _____ Phone Number: _____

Email address: _____ Cell Phone Number _____

Type of Construction or Type of Business applying for zoning compliance

Residential Bus/Commercial Existing Commercial Industrial

1. Renovations/Additions Windows/doors Additional sq/ft. Plat/Drawing attached
 Sewer Tap paid
2. Accessory Structures Platt/Drawing attached * **See below for inspection requirements**
 Garage Storage Building Deck/Patio Screen room Swimming Pool
3. Fence Size & Height _____ 6ft or under Fence type _____
4. Solar installation Drawing attached
5. HVAC Plumbing Electrical Gas
6. **SEEKING BUSINESS ZONING COMPLIANCE:**
 Home Occupation Business type _____
 Type of In Town Business (Not Home Occupation) _____

* **All construction permit applications other than those listed below are to be submitted to CC&I Services, LLC at www.cciservicesllc.com, (864)586-6111, email permits@cciservicesllc.com.**

* **Final Inspections will be required for the installation of detached garages, carports, storage buildings/sheds, under 200 square feet; fences not exceeding 6 1/2' in height. Contact Zoning Administrator at 864-439-0680 within 60 days after issuance of zoning approval for final inspection.**

Zoning Review & Inspection Fee for above construction: \$25.00

Applications will be reviewed within 5 business days after submittal.

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

----- For Official Use Only -----

APPROVED DENIED PENDING Date: _____

Current Zoning District _____

Zoning Administrator _____ Fee Paid _____

Brandy Blake 864.439.0680 bblake@lymansc.gov

Business License Obtained New Sewer Tap Fee Paid Existing Sewer Service Septic only

Comments/Conditions: _____
