



Variance Application

Application Instructions:

1. **Meetings with Zoning Administrator are required PRIOR to application submittal and are by appointment only.**
2. Submit the application form with owner's signatures, legal description (current survey), supporting documents, and a map with the rezoning areas highlighted.
3. Application Fee: \$100.00
4. Please see attached meeting schedule for meeting dates and deadlines.

Name of Property Owner: _____

Address of Property Owner: _____

Phone Number: _____ Email: _____

Signature(s) of Property Owner: _____

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

Phone Number: _____ Email: _____

Signature of Applicant(s):

Requesting a variance from: (check one of the following regulatory documents)

Land Development Regulations Zoning Ordinance

Requested variance to Section/Article: _____

Property address for variance request: _____

Tax Map Number: _____ Current Use of Property: _____

Number of Acres: _____ Zoning District: _____

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