



SUMTER CITY-COUNTY PLANNING COMMISSION

POST OFFICE BOX 1449
SUMTER, SOUTH CAROLINA 29151
(803) 774-1660



COMPREHENSIVE PLAN ORDINANCE / MAP AMENDMENT CITY COUNTY

Map Text

Applicant's Name: _____

Applicant's Address: _____

Street _____

City _____ State _____ Zip _____ Phone _____

E-mail Address: _____

Proposed Text Amendment: _____

Proposed Map Amendment: _____

Tax Map No. _____ **Address:** _____

Is this tract or parcel restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity described in this permit? Yes No

Adjacent Property:	<u>Land Use Designation</u>	<u>Use</u>
North of: _____	_____	_____
East of: _____	_____	_____
South of: _____	_____	_____
West of: _____	_____	_____

Justification/Reason for Proposed Amendment: _____

Signature of Applicant **Date**

CERTIFICATION

I hereby certify that I have read this application and the information supplied herein is true and correct to the best of my knowledge. I agree to comply with all applicable City and/or County Ordinances and State Laws related to land development. I am the property owner, or have received the owner's written authorization to act as his/her agent regarding this matter. I understand that falsifying any information herein may result in nullification of this request and/or appropriate legal remedies.

Property Owner or Authorized Agent Name, Signature and Date

APPLICATION MUST:

- ◆ Be submitted 22 days prior to next scheduled Planning Commission meeting
- ◆ Include an application fee of \$100.00

If you should desire a pre-application conference, please call 774-1660 for an appointment.

OFFICE USE:	
Date Fee Paid _____	Amount Paid _____
Reviewed By _____	Meeting Date _____