

SUMTER CITY-COUNTY PLANNING COMMISSION

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



APPLICATION FOR SUBDIVISION

CITY  COUNTY

**Applicant**

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Applicant's Address**

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**E-mail Address**

\_\_\_\_\_

**Owner**

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Owner's Address**

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Registered Land Surveyor**

Name \_\_\_\_\_

**Surveyor's Address**

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Tax Map No.**

\_\_\_\_\_

**Size of Parcel(s)**

\_\_\_\_\_

**Name of Proposed Subdivision**

\_\_\_\_\_

**Location of Proposed Subdivision**

\_\_\_\_\_

**Zoning**

\_\_\_\_\_

**Proposed Use**

\_\_\_\_\_

**Total Acreage**

\_\_\_\_\_

**Flood Hazard Area**

Yes  No  Partial

\_\_\_\_\_ (Indicate which lot(s) may be affected)

**Wetlands**

Yes  No  Partial

\_\_\_\_\_ (List acreage)

**Water Service:**

**Proposed Method of Water Supply**

\_\_\_\_\_

**Approximate Distance to Nearest Water Main (if applicable)**

\_\_\_\_\_

**Sewer Service:**

**Proposed Method of Sewer Collection & Disposal**

\_\_\_\_\_

**Approximate Distance to Nearest Public/Community Sewer**

\_\_\_\_\_

**NOTE:** If septic tanks are contemplated, the SC Health Department will require a Soil Report from the Soil Conservation Service and a Percolation Test Report. The Sumter City-County Planning Commission will **not** issue final approval until the SC Health Department has first approved sewerage service.

Name of Power Company \_\_\_\_\_

Name of Telephone Company \_\_\_\_\_

Proposed Streets  Paved with valley gutters  Paved with curb and gutter

Has the County Auditor approved the proposed street names?  Yes  No

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

Application Completed by Owner  Agent  (See Below)

Agent's Name \_\_\_\_\_ Phone \_\_\_\_\_

Agent's Address \_\_\_\_\_  
Street City State Zip Code

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 at least 22 days prior to the next scheduled Subdivision-Planned Development Review meeting
- ◆ Include sketch plan of proposed subdivision and/or a plat of the property
- ◆ Include an application fee of \$50.00 or \$3.00 per lot (whichever is greater) (City or County)
- ◆ Review Article 9 of the Sumter Zoning and Development Standards Ordinance
- ◆ Please note that the Subdivision may be subject to Public Utilities Commission review if water and/or sewer concerns exist.

<b>OFFICE USE:</b>	
Date Fee Paid _____	Amount Paid _____
Received By _____	Meeting Date _____
Preliminary Approval Date _____	Final Approval Date _____