SUMTER CITY-COUNTY PLANNING COMMISSION

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

ZONING ORDINANCE TEXT AMENDMENT PROPOSAL

☐ CITY ☐ COUNTY

Initiated By _____ **E-mail** _____

Address _____
Street

_____ **Phone** _____
City State Zip

Purpose of Proposed Amendment _____

_____

_____

_____

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**

Tax Map No. _____ **Zoning** _____

Address _____

Use of Adjacent Property ***Front*** _____ ***Side*** _____
Rear _____ ***Side*** _____

Proposed Text Amendment : _____

_____

_____

_____ _____
APPLICANT SIGNATURE **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 Planning Commission meeting**
- **Include an application fee of $100.00 (City or County)**

Note: Please contact the Planning Commission Office if you would like to schedule a pre-application conference

OFFICE USE:
Date Fee Paid _____ *Amount Paid* _____
Received By _____ *Meeting Date* _____