

FOR INTERNAL USE ONLY

Case Number: _____ Fee Paid: _____
Date Submitted: _____ Received By: _____



**129 Screven Street
Georgetown, S. C. 29440
Phone: 843-545-3158
Fax: 843-545-3299**

ZONING BOARD OF APPEALS

THE APPLICANT HEREBY APPEALS: (Indicate one)

- () An action of the Zoning Administrator as stated on attached **Form 2**.
- () A variance as stated on attached **Form 3**.

The following information must be provided for either request:

Property Information:

Tax Map (TMS) Number: _____

Street Address: _____

City / State / Zip Code: _____

Lot Dimensions/ Lot Area: _____

Plat Book / Page: _____

Current Zoning Classification: _____

Property Owner of Record:

Name: _____

Address: _____

City/ State/ Zip Code: _____

Telephone/Fax Numbers: _____

E-mail Address: _____

Signature of Owner / Date: _____

I have appointed the individual or firm listed below as my representative in conjunction with this matter related to the Zoning Board of Appeals.

Agent of Owner:

Name: _____

Address: _____

City / State / Zip Code: _____

Telephone/Fax: _____

E-mail: _____

Signature of Agent/ Date: _____

Signature of Property Owner: _____

**Fee Required: \$250.00 for variance
\$500.00 for an appeal to an interpretation**

Adjacent Property Owners Information required:

1. A list of all adjacent property owners (and related Tax Map Numbers) must also accompany the application.

Form 2 – Appeal Request

1. Applicant hereby appeals to the Zoning Board of Appeals from the action of the Zoning Administrator affecting the property described in the Notice of Appeal (Form 1) on the grounds that:
granting____ denial____ of and application for a permit to _____ was erroneous and contrary to provisions of the zoning ordinance in Section:_____ or other action or decision of the Zoning Official was erroneous as follows:

2. Applicant is aggrieved by the action or decision in that:

3. Applicant contends that the correct interpretation of the zoning ordinance as applied to the property is:

4. Applicant request the following relief:

Form 3 – Variance Request

1. Applicant hereby appeals to the Zoning Board of Appeals for a variance from the strict application to the property described in the Notice of Appeal (Form 1) of the following provisions to the Zoning Ordinance:

So that a zoning permit may be issued to allow use of the property in a manner ___ shown on the attached plot plan, described as follows:

For which a zoning official has denied a permit on the grounds that the proposal would be in violation of the cited section(s) of the Zoning Ordinance.

The following section must be filled out completely.

2. The application of the ordinance will result in unnecessary hardship, and the standards for a variance set by State Law and the ordinance are met by the following facts:
 - There are extraordinary and exceptional conditions pertaining to the particular piece of property as follows:

 - These conditions do not generally apply to other property in the vicinity as shown by:

- Because of these conditions, the application of the ordinance to the particular piece of property would effectively prohibit or unreasonably restrict the utilization of the property as follows:

- The authorization of the variance will not be of substantial detriment to the adjacent property or to the public good, and the granting of the variance for the following reasons will not harm the character of the district:

The following documents must be submitted as evidence in support of this application:

- A scaled plot plan indicating the existing conditions and proposed additions.
- Please submit one (1) large (24x36) and one (1) specified digital version (PDF) of the scaled plot plan.

If you need assistance with this application, please contact our office at 843-545-3128.

Please submit the completed application, all additional materials along with the **required fee to: *Georgetown County Zoning Department, 129 Screven Street, Georgetown, S. C. 29440.***

I (we) certify that the information in this application and the attached Form 2 or 3 is correct.

Date: _____

Applicant name and signature(s): _____

Contact Person and Number: _____

E-mail: _____

Site visits to the property, by County employees, are essential to process this application. The owner/applicant, as listed above, hereby authorizes County employees to visit, photograph, and post a notice on the property in which this application references. These signs belong to Georgetown County and will be picked up from your property within five (5) working days of the meeting.