



129 Screven St. Suite 222
Post Office Drawer 421270
Georgetown, SC 29440
Phone: 843-545-3158
Fax: 843-545-3299

**GEORGETOWN COUNTY PLANNING DIVISION
APPLICATION FOR STREET NAME**

**PLEASE SUBMIT A MAP WITH YOUR STREET NAME APPLICATION.
APPLICATION FEE MUST BE RECEIVED BEFORE APPLICATION IS PROCESSED.**

The street name has received a name from Georgetown County. (Circle one) YES NO

Street names to be considered for this street:
*DO NOT INCLUDE SUFFIX (i.e., Road, Lane, Street, etc.)

Tax Map Number:

- 1. _____
- 2. _____
- 3. _____

Subdivision or Community:

The street is (circle one): Privately Maintained County Maintained

There are _____ parcels on this street and the property owners presented below represent _____ percent of them**.

Property Owner Name	Property Address	Property TMS#
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**At least 51% of the parcels adjacent to the existing unnamed street must be included and 80% of the parcels adjacent to the existing named street (streets to be renamed) must be included.

Name_____

Today's Date_____

Address_____

Phone_____

Email_____

If you need assistance with this application, please contact our office at 843-545-3158.

Please submit the completed application, any additional materials along with the **required fee** to Georgetown County Planning Division, 129 Screven St. Suite 222, Georgetown, S. C. 29440.

Application Fee: 100.00 (required at time of submittal)

Sign Fee: 100.00 (only applicable if you would like for the County to make and install a sign and shall be required once name is approved)

<u>FOR OFFICE USE ONLY</u>		
Date Received_____	Review Fee Paid (\$100)_____	Sign Fee Paid (\$100)_____
Date notified: 911_____	Public Works_____	GIS_____
Approved Street Name_____	Date of Approval_____	