

**Town of McClellanville
Zoning Permit Application**

Date Filed: _____

Fee \$25⁰⁰ - Paid:

THE APPLICANT HEREBY REQUESTS a zoning permit pursuant to Section 10.5.2 of the McClellanville Zoning and Land Development Ordinance to use and/or develop the subject property in the following manner:

Applicant(s)[print]: _____

Mailing Address: _____

Telephone: [work] _____ [home] _____ [cell] _____

Email Address of Applicant: _____

Interest: Owner(s) ; Agent of Owner(s) ; Other _____

If the Applicant is other than the owner

Owner(s)[print]: _____

Mailing Address: _____

Telephone: [work] _____ [home] _____ [cell] _____

[Please list additional owners on reverse side]

Note:

If the application is on behalf of the property owner(s), all owners must sign. If the applicant is not an owner, the owner(s) must sign the Designation of Agent section.

DESIGNATION OF AGENT [complete only if owner is not applicant]: I (we) hereby appoint the person named as Applicant to represent my (our) interest in this request for a zoning permit.

Date: _____

CERTIFICATION OF COVENANTS/RESTRICTIONS

I (we) hereby certify that to my (our) knowledge, the tract or parcel of land subject to this application **check one, is is not** restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity for which this permit is sought. If such covenant exist(s), a copy of the recorded document must be attached for this application to be complete.

I (we) certify that the information in this request is correct.

Date: _____

Owner/Applicant signature(s)

Property Address: _____

Zoning District: _____

TMS#: _____ - _____ - _____ - _____

Subdivision: _____

Total Lot Area (acres): _____

Lot Dimensions (feet): _____

Area of Highland (acres): _____

Proposed:

Proposed Lot Coverage: _____

Proposed Use: _____

Set Backs (feet): Front _____ Left Side _____ Right Side _____ Rear _____

Residential Floor Area (sq feet heated) _____ **Porches/other (sq feet unheated)** _____

Building Height (feet above base flood elevation): _____

Zoning Administrator Review

Date: _____ **Approved** **Approved with conditions** **Disapproved**

Zoning Administrator