



ADDRESS ASSIGNMENT

Our #1 Priority is Emergency Response Time

DESCRIPTION

A valid street address is required to apply for a building or zoning permit. If your property does not yet have an address, application can be made through the Planning and Zoning Department. Addresses are assigned by the Planning Department in consultation with 9-1-1 services.

PROCESS

- Submit Address request form and supporting information to the Planning Department;
- Owner will be notified of address assignment by letter.

INFORMATION TO PROVIDE

Completed *Address Request* form with the following attachment(s):

- **For Existing lots:** Copy of recorded plat (can be obtained from Berkeley County Register of Deeds, if available);
- **For Newly Subdivided Lot:** Recorded copy of City of Goose Creek approved plat;
- **For Apartments/Malls:** Floor plan/store layout;
- **For new tenant space within an existing building:** Building floor plan showing the layout of suites, units, etc., include all existing addresses.

TIME

3-5 Days. Possibly longer depending on circumstances.

CONTACTS

Planning and Zoning
519 N. Goose Creek Blvd
Goose Creek, SC 29445
Phone: (843) 797-6220
Brenda Moneer, Planner II ext. 1116
Adam McSparran, GIS Coordinator ext. 4270
planning-zoning@cityofgoosecreek.com

Berkeley County Register of Deeds – *To obtain copy of recorded plat (If available)*
1003 US Highway 52
Moncks Corner, SC 29461
Phone: (843) 719-4084
www.berkeleycountysc.gov

Note¹: Corner lot addresses are assigned for Residential properties depending on which street the front door faces; Commercial properties depend on the driveway location or street frontage. Note²: Street names and addresses for new subdivisions are assigned during the subdivision plat process.

Note³: For street name changes, contact the Planning and Zoning Department

ADDRESS REQUEST APPLICATION

CITY OF **GOOSE CREEK** PLANNING & **ZONING DEPARTMENT**

519 N. Goose Creek Blvd, Goose Creek, SC 29445 • 843-797-6220

Brenda Moneer, Planner II ext 1116

Adam McSparran, GIS Coordinator ext. 4270

Email: planning-zoning@cityofgoosecreek.com

ALL APPLICABLE FIELDS MUST BE COMPLETED!!!

DATE			
IS THIS A (check one):	<input type="checkbox"/> New Address Assignment <input type="checkbox"/> Address Verification Letter Only		
REQUESTOR INFORMATION	NAME:		
	ADDRESS:		
	TEL:		FAX:
	E-Mail:		
PROPERTY OWNER INFORMATION	NAME:		
	ADDRESS:		
	TEL:		FAX:
	E-Mail:		
TMS #(s)			
SUBDIVISION NAME			
PHASE		LOT(s)	
STREET NAME			
PROPERTY DESCRIPTION	<input type="checkbox"/> New Subdivision <input type="checkbox"/> New Subdivided Lot <input type="checkbox"/> New Combined Lot <input type="checkbox"/> Existing Lot <input type="checkbox"/> Other		
STRUCTURE	<input type="checkbox"/> No Structure <input type="checkbox"/> Existing Structure <input type="checkbox"/> New Structure		
STRUCTURE TYPE/USE (check one)	<input type="checkbox"/> One Family Residence <input type="checkbox"/> Two Family Residence <input type="checkbox"/> Townhome <input type="checkbox"/> Multi-Family Building <input type="checkbox"/> Multi-Family Complex <input type="checkbox"/> Commercial Building <input type="checkbox"/> Commercial Building Complex <input type="checkbox"/> New tenant space in existing structure <input type="checkbox"/> Other (explain below)		
SIGNATURE			