

CITY OF GOOSE CREEK PLAT APPLICATION - FORM-P §6-29-1110(2)(a)(b)(c)

This application is for plat submittals that require lot line adjustments. If lines are to be removed, relocated, abandoned or modified in any way, the owners of said impacted lot (s) must be party to this application as attested to by their notarized signature.

Today's l	DATE	E:		_				F	PERMIT FEE: \$ 75.00
1. DEV	Developer/Owner				BUSINESS PHONE ALTERNATE PHONE				
Nam	NAME OF SUBDIVISION								
STRE	STREET ADDRESS								
2. WHA	AT IS	THE ZONING CI	ASSIFICATION F	OR THIS PROPE	RTY?				
3. Proi	PERT	Y INFORMATIO	N:						
	A.	TMS:			No. of Lots:		TOTAL ACREAGE: _		_
		NAME:				PHONE:			
		ADDRESS:				CITY:		ST:	ZIP:
		SIGNATURE O	F PROPERTY OWN	ER:			(Signature must	be witnesse	d by notary)
	B.	TMS:			_ No. of Lots:		TOTAL ACREAGE:		_
		Name:				PHONE:			
								ST:	ZIP:
		SIGNATURE O	F PROPERTY OWN	ER:			(Signature must	be witnesse	d by notary)
	C.	TMS:			No. of Lots:		TOTAL ACREAGE:		_
		Name:				PHONE:			
		ADDRESS:				CITY:		ST:	Zip:
		SIGNATURE O	F PROPERTY OWN	ER:			(Signature must	be witnesse	d by notary)
Notary A	A UTH	IORIZATION							
State of Sc	outh (Carolina)					In v	vitness hereof, I hereunto
)SS:					1	my hand and official seal
County of)						
On this, theday of, 20			, before me a notary public, the undersigned officer,						
personally	appe	eared		, known to	me (or satisfactorily pro	ven) to be the	person whose name		
is subscrib	ed to	the within instr	rument, and ackno	owledged that he	e executed the same for the	e purposes th	nerein contained.		
SIGNATURE OF APPLICANT					SIGNATURE OF NOTARY				
	3	DIGNATUKE UF A	IFFLICAN I		SIGNAI	UKE OF INOTA	AK I		
_					OFFICE USE ON	<u>LY</u>			
Remark	:s:								

Approval: Zoning Administrator ______ Issued by: _____