



## Rezoning Application

Today's Date \_\_\_\_\_

Please complete and return to [planning-zoning@cityofgoosecreek.com](mailto:planning-zoning@cityofgoosecreek.com)

### Part I. Applicant Information

1. Name \_\_\_\_\_ Company (if applicable) \_\_\_\_\_
2. Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
3. Phone \_\_\_\_\_ Email \_\_\_\_\_
4. Is the applicant the owner of the property? \_\_\_\_\_
5. Please fill out the agent waiver on the back of this application if the applicant is not the owner of the property.

### Part II. Project Information

1. TMS# \_\_\_\_\_
2. Street Address \_\_\_\_\_
3. Current Use \_\_\_\_\_ Proposed Use \_\_\_\_\_
4. Current Zoning \_\_\_\_\_ Proposed Zoning \_\_\_\_\_
5. Total acreage requested to be rezoned \_\_\_\_\_
6. Pursuant to S.C. Code § 6-29-1145, is this tract or parcel restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity described in the permit? \_\_\_\_\_

### Project Description:

### Part III. Signature and Acknowledgement

**I affirm that the information submitted is correct and complete. I understand that any inconsistencies may cause a delay in the review of the appeal.**

Applicant signature \_\_\_\_\_



**Rezone Application**

**Agent Waiver**

*I hereby designate \_\_\_\_\_ to serve as my agent regarding this application, to receive and respond to administrative comments, to resubmit plans on my behalf, and to represent me in any public meetings regarding this application.*

**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Person Completing this Application:** \_\_\_\_\_

**Signature of Person Completing this Application:** \_\_\_\_\_