



BERKELEY COUNTY ZONING USE APPROVAL FORM

APPLICANT: This is the person who is requesting the address or septic approval. Fill in name, full address, and phone number.

PARCEL'S CURRENT USE: The current activity occurring on the property. If someone is currently living on the parcel the use is **Residential**. If there is a business on the property the use is **Commercial**. If there is nothing on the property the use is **Vacant**.

PROPERTY TAX MAP #: The Tax Map Number can be found on the property tax notice. The Property Tax Map Reference Number is important because it gives the Zoning Official access to pertinent information not listed on the application.

LOT SIZE: In this space provide the size (area) of the lot. You may use either acres or square feet.

NUMBER OF BUILDINGS ON PARCEL: List the number of each type of structure on the property. Please list each structure including storage buildings and garages.

APPLICANT'S NAME: _____ PHONE: _____

ADDRESS: _____
NUMBER STREET CITY STATE ZIP CODE

TAX MAP #: _____ LOT SIZE: _____ NUMBER OF BUILDINGS ON PARCEL: _____

PARCEL'S CURRENT USE: _____ PROPOSED USE: HOUSE: _____, DUPLEX: _____, MOBILE: _____,

MULTI- FAMILY (Type): _____, COMMERCIAL _____, OTHER: _____,

(COMMERCIAL, INDUSTRIAL OR MULTI-FAMILY DEVELOPMENT MAY REQUIRE A SITE PLAN.)

I CERTIFY THAT ALL INFORMATION PRESENTED BY ME IN THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BENEFIT:

APPLICANT

DATE

OFFICE USE ONLY

ZONING DISTRICT: _____ HEIGHT (MAX): _____ IMPERVIOUS (MAX.): _____

SETBACKS: FRONT: _____ REAR: _____ L. SIDE: _____ R. SIDE: _____ DRIVE: _____ DRAINAGE: _____

BUFFERS: FRONT: _____ REAR: _____ L. SIDE: _____ R. SIDE: _____

APPROVED BY: _____
ZONING OFFICIAL DATE