

**CLARENDON COUNTY, SOUTH CAROLINA
PLANNING DEPARTMENT
411 Sunset Drive Manning SC 29102
Ph. 803.435.8672 Fax 803.435.2208**

SITE PLAN REVIEW APPLICATION

In accordance with the provisions of 6-29-1145 of the SC Code of Laws, you (the applicant) must let us know if there are any restrictive covenants on the tract or parcel of land that is contrary to, conflicts with, or prohibits the requested activity.

Project Name: _____ Project Number: _____

Application Fee: \$ _____ Receipt Number: _____

Tax Map Numbers: _____

Attach Complete Legal Description, i.e. metes and bounds or subdivision lot number and plat book and page.

General Location: _____

Current Zoning: _____

Existing Use of Property: _____

Parcel Size: _____ Impervious Surface Ratio: _____

Residential Units/Lots: _____ Estimated Number of Employees: _____

Storage Area: _____ Structure Area: _____

Potable Water Source: _____ Sewage Disposal Method: _____

Applicant/Representative: (Contact Person) _____

Address: _____

Telephone Number: _____ Fax Number: _____

If the applicant is someone other than the property owner, the applicant must include a statement signed by the property owner which authorizes the applicant to apply for this specific purpose and location on his behalf. Such statement must be attached to this application.

CERTIFICATION

I hereby certify that I have read this application and the information supplied herein is true and correct to the best of my knowledge. I agree to comply with all applicable county Ordinances and State Laws related to land development. I am the property owner, or his authorized agent of the subject site.

Authorized Agent Name, Signature, and Date