

Development Services - Permit Application Center

P.O. Box 11706, or 155 Johnston Street
Rock Hill, South Carolina 29731-1706
Phone: 803-329-7080 or 803-329-7089
FAX: 803-329-7228 -- website: www.cityofrockhill.com



ZONING MAP AMENDMENT: Sections 2-200 and 2-300 of the Zoning Code establish the requirements and processes for amending the Official Zoning Map.

An application for rezoning may be submitted by the land owner, or any other person having a recognized interest in the land upon which the rezoning is proposed, or their authorized agent. If the applicant is not the owner, the owner must sign a consent to the submission. If there are multiple owners, a letter [or attachment] signed by the other owners or an entity representing the owners consenting to or joining in the application shall be submitted.

A pre-application conference with appropriate City staff is required prior to the submission of a Zoning Map Amendment application. Contact the Permit Application Center, above.

Application Information: Please complete the following:

NAME: Phillip WARREN
ADDRESS #: _____ St: 761 E. Mam ST CITY/ST/ZIP: Rock Hill, SC 29731
PHONE: 803) 526-1528 FAX: 803) 327-4266 EMAIL: phil@tds2.com
PROPERTY ADDRESS: #: _____ St: 905 E Main ST # 106 Highland Street
TAX PARCEL[s]: 6260202018; 6260202017; _____

OWNER [if different] _____
Current Zoning: IG Requested Zoning: _____ OI

Area of subject property: _____ acres and/or ± 1200 square feet

BRIEF DESCRIPTION OF Request [refer to the zoning code, when applicable]:
Rezone From IG to OI

****Please review the attached CHECKLIST for additional information on fees, required supporting information, and timetables.**

FOR OFFICE USE ONLY: Case #: M. 2010-05 Date Filed: 3/29/10 Rec'd by: [Signature]
 Pre-App? Request Complete? Additional Information Requested/Date: _____
Comment: _____
 Request Returned? Date: _____ Action: by: _____
Date Advertised: _____ Date Posted: _____ Written Notice? Date: _____
PC Date: _____ CC Date: _____ Final Date: _____ Legal ad filed?
Action: _____
 Written Response By: _____ Date: _____

