



CITY OF TRAVELERS REST
APPLICATION FOR AMENDMENT TO OFFICIAL
TRAVELERS REST ZONING MAP AND ANNEXATION
6711 State Park Road
Travelers Rest, S.C. 29690

Advertised: \_\_\_\_\_ Public Hearing: \_\_\_\_\_
Docket #: \_\_\_\_\_ Property Posted: \_\_\_\_\_
Fee Paid: \_\_\_\_\_ Application Taken By: \_\_\_\_\_

1. Property Owner
Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_
Address: \_\_\_\_\_
Representative: \_\_\_\_\_ Telephone #: \_\_\_\_\_
Representative's Address: \_\_\_\_\_

2. Other Applicant
Name: \_\_\_\_\_
Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_
Representative: \_\_\_\_\_ Telephone #: \_\_\_\_\_
Representative's Address: \_\_\_\_\_
Property Interest: \_\_\_\_\_

3. Property Location
Tax Map #: \_\_\_\_\_ Acreage: \_\_\_\_\_
Present Zoning Classification: \_\_\_\_\_
Requested Zoning Classification: \_\_\_\_\_

4. Property Characteristics
Frontage on Public Road (Feet): \_\_\_\_\_
Water Available: \_\_\_\_\_ Sewer Available: \_\_\_\_\_
Current Use of Property: \_\_\_\_\_
Proposed Use of Property: \_\_\_\_\_
Affected By GRATS or Other Public Action: \_\_\_\_\_

5. Has any application involving this property been considered by City Council or Travelers Rest Planning Commission Board before? \_\_\_\_\_ If so, please include Docket Number \_\_\_\_\_

6. Reasons for request and any information submitted in support of request: \_\_\_\_\_

The undersigned represents that he/she is \_\_\_\_\_ (Owner; authorized Representative) in the foregoing application and that no person other than those identified as the owner and/or applicant other than owner have an interest in the property which is the subject of this application.

Owner/Authorized Agent \_\_\_\_\_ Date Application Filed \_\_\_\_\_