



**Office Use Only:**

Application# \_\_\_\_\_ Fees Paid \_\_\_\_\_

Date Received \_\_\_\_\_ Accepted By \_\_\_\_\_

Date Complete \_\_\_\_\_ App Deny Conditions \_\_\_\_\_

**APPLICATION FOR**

**Zoning Letter Request**

Contact Planning & Development (864) 834-8740

**APPLICANT INFORMATION**

Applicant / Business Name	
Address	
City, State, and Zip Code	
Email	
Phone	

**PROPERTY INFORMATION**

Owner Name	
Address	
Tax Map or Parcel ID #	
Email	
Phone	

**INTERNAL ADDRESS INFORMATION**

To Whom the Letter Should Be Addressed	
Address	
City, State, and Zip Code	

**INSTRUCTIONS**

1. An application and fee (made payable to the City of Travelers Rest) must be submitted for each individual parcel.
2. The following information is provided in a standard zoning letter request: zoning classification, zoning description, any known open violations associated with the property, and any known entitlements associated with the property.

3. Please provide any additional requested information below:

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