Florence County
Planning Department
518 S. Irby Street
Florence, SC 29501
843-676-8600

APPLICATION FOR CERTIFICATION OF ZONING COMPLIANCE

Form ZC-2026-09

Applicant's Name:

Applicant's Address:

Applicant's Contact Number: **Email:**

Business Name:

Business/Site Address: **Current Zoning District:**

Tax Map Number:

Existing Building/Business: **Date of last occupancy:**

New Building/Business: **NAICS NUMBER**

Description of Business:

Do you intend to make any renovations? Yes□ or No □

If yes, what are the renovations?

Is the business a home occupation? Yes □ or No □

Is this a child daycare service occupation? Yes □ or No □

If so, how many children will you be provided services to? _____

Please check one of the following categories and initial

Commercial:_____ Industrial_____ Accessory/Shed_____ Support Uses_____ Non-Conforming Use_____ Other_____

Manufactured Home Park

Single Family _____Duplex_____ Triplex_____ Manufactured Home_____ Mobile Home_____ Multi-Family_____

Please describe the type of use in full detail:

Number of structures on lot: **Number of structures proposed for lot:**

Are all planned improvements (bldgs, fence(s), buffers, etc.) shown on the Site Plan?

RESTRICTIVE COVENANTS AFFIDAVIT

Explanation:

Effective July 1, 2007, the South Carolina Code of Laws Section 6-29-1145 requires local governments to inquire in the permit application, or in written instructions provided to the applicant, if a tract or parcel of land is restricted by a recorded covenant that is contrary to, conflicts with or prohibits an activity for which a permit is being sought.

1. _____have reviewed the restrictive covenants applicable to Tax Map Sheet
(Printed Name)

_____ located at _____,
(Site Address)

and the proposed permit application is not contrary to, does not conflict with, and is not prohibited by any current and valid restrictice covenants, as specified in South Carolina Code of Laws, Section 6-29-1145.

_____

[Signature] **[Date]**

Site Plan: Information to be provided by the applicant, if required by staff.

A Certificate of Zoning compliance is not authorization to use or occupy this building. Only the Building Department has authority to grant the use and or occupancy of a building. ____ initial.
The information provided on this form and the required site plan(s) is accurate and complete to the best of my knowledge . ____ initial.
I understand that this zoning compliance certificate is specifically for the stated use(s) represented on the site plan and this document. ____ initial.
I further understand that any proposed changes to the site which are not represented on the currently submitted site plan or zoning compliance form will require separate compliance certificate from the Florence County zoning staff. ___ initial.
I further understand the information that I have provided is subject to on-site verification by Florence County Building Inspectors. ___ initial.
If any work described on the form has not begun with in one year from the date of issuance the certificate shall expire. ___ initial.

Applicant's Printed Name:

Applicant's Signature: **Date:**

[FOR ZONING STAFF USE ONLY]	
Required Parking Spaces:	**Proposed Number of Parking Spaces:**
If non conforming category is checked please reference Section 30-249 of the zoning ordinance for approval in accordance with this section.	
Is a common signage plan required and attached as stipulated by Section 30-203 of the zoning ordinance? ( ) YES ( ) NO	
Is the signed permit application approved in accordance with pertinent stipulations as set forth in Article 5 - sign regulations of the zoning ordinance? ( ) YES ( ) NO	
The requirements of Chapter 30- Zoning Ordinance based on the information as provided by the applicant:	
( ) DOES MEET ( ) DOES NOT MEET	
[ZONING STAFF INFORMATION CONTINUED]	
The approval of the zoning compliance and issuance of the same is done in good faith based on information as provided by the applicant.	
This certificate does not grant the right nor privilege to erect any structure or to use any premises described for any purpose or in any manner that is prohibited by Chapter 30- Zoning Ordinance or by any other ordinance, code or regulation of the Florence County Planning Commission.	
Approved: Not Approved:	**Date:**
Zoning Compliance Fee:	
Zoning Compliance issuing date:	
Zoning Official:	