

**FLORENCE COUNTY PLANNING AND BUILDING INSPECTION DEPARTMENT**  
**518 S. Irby Street, Florence, S.C. 29501**  
**(O) 843-676-8600 of Toll free 866-258-9232**  
**(Fax) 843-676-8667 or Toll free 866-259-2068**  
**(Florence County, Johnsonville, Olanta, Pamplico, Quinby, Scranton, Timmons ville)**  
**ZONING COMPLIANCE CERTIFICATION FOR SPECIAL USE PERMIT**

To Be Issued By Zoning Compliance Staff:

CERTIFICATE NO. \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_

TAX MAP NUMBER: \_\_\_\_\_

SITE ADDRESS: \_\_\_\_\_

TYPE OF EVENT: \_\_\_\_\_

DATE (S) OF EVENT: \_\_\_\_\_

APPROXIMATE NUMBER OF PEOPLE IN ATTENDANCE: \_\_\_\_\_

This form must be submitted to the Planning Director 120 days prior to the opening of the event. A \$25.00 Zoning Compliance Fee must accompany this application at time of submittal. The Planning Department will arrange an initial meeting with the applicant and appropriate departments and agencies within 6 working days of receipt of the application. In addition, the Planning Director may request the following if determined necessary to properly assess the application or protect the county and property owners. The following information must be submitted along with this application, if checked:

- a site plan showing location of the use, other building (s), and parking area with the adequate amount of spaces as determined by the Planning Director on the site, all driveways to the site and all surrounding properties and streets, and the location and types of all signs, including lighting and heights;
- documentation from the property owner agreeing to the use as specified in the application;
- such other data as may be required to demonstrate that the project meets the criteria.

The following conditions may be added to this application as part of the approval from the Planning Department at anytime as requested during the process based on department and/or agency input. Details on the checked items must be submitted along with this application:

- A fixed period for each use
- Hours of operation
- Limits on ingress and egress to the site and appropriate directional signing, barricades, fences or landscaping
- Security

- Temporary off-street parking facilities
- Removal of all materials and equipment and restoration of the premises to the original condition
- Special signage

Site Address: \_\_\_\_\_

After the initial meeting, it will be the requirement of the applicant to obtain the needed signatures on this application, any additional information as requested by the departments and agencies, along with the following information, if checked:

- a cash bond to be set by the Planning Director shall be posted or a signed contract with a local disposal firm shall be required to ensure that the premises will be cleared of all debris during and after the event;
- traffic control arrangements required by the City Police, County Sheriff Department, SCDOT Highway Patrol in the vicinity and at major intersections shall be arranged by the applicant;
- documentation from the Florence County Health Department that adequate arrangements for temporary sanitary facilities has been ensured must be provided;
- insurance policy or policies naming the County, its officers, agents, and employees as additional insured, issued by a company satisfactory to the County Attorney, and in an amount determined to be adequate for the risks involved in the activity, as determined by the Planning Director;

The following departments must agree and sign this document that they have been made fully aware of the event and the applicant has meet all requirements and supplied all information as specified herein of the department.

**Florence County Sheriff's Department:** \_\_\_\_\_  
**If applicable, City of Johnsonville, the Towns of Olanta, Pamplico, Quinby, Scranton or Timmonsville Police Department:** \_\_\_\_\_  
**Florence County Emergency Medical Services:** \_\_\_\_\_  
**Applicable Fire Department:** \_\_\_\_\_  
**Florence County Department of Health and Environmental Control:** \_\_\_\_\_

Any and all agencies and departments, reviewing the special use permit application, are hereby authorized to assess fees for any additional services rendered beyond the level typically demonstrated by that agency.

**To Be Completed By Zoning Compliance Staff:**

Certificate Number: \_\_\_\_\_  
 Zoning District: \_\_\_\_\_

This proposed use meets all of the requirements of the Zoning Ordinance. This certificate does not grant the right nor privilege to erect any structure nor to use any premises described for any purpose or in any manner that is prohibited by the Zoning Ordinance or by any other ordinance, code or regulation of the Florence County Planning Commission. A building permit must accompany this certificate from the Division of Building Inspection in order to receive a Certificate of Completion.

**Zoning Compliance Issue Date:** \_\_\_\_\_  
**Zoning Official:** \_\_\_\_\_

Site Address:

The information provided on this form and on any required site plan(s) is accurate and complete to the best of my knowledge. I understand that this zoning compliance certificate is specifically for the stated use(s) represented on the site plan and this document. 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 a separate zoning compliance certificate from the Florence County Planning Department staff. I further understand the information which I have provided is subject to on-site verification by Florence County Building Inspectors.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_