

Landscaping Application



157 NW Columbia Ave P.O. Box 183 Chapin, SC 29036

Process and Approval:

Administrative

Instructions:

If the application is on behalf of the property owner(s), all owners must sign. If the applicant is not an owner, the owner(s) must sign the Designation of Agent section.

The applicant hereby requests:

A landscaping permit pursuant to Article 7 of the Town of Chapin Unified Zoning and Development Ordinance to modify the landscaping as described below:

DESIGNATION OF AGENT AUTHORIZATION:

I (we) hereby appoint the person named as "Applicant" as my (our) agent to represent me (us) in this landscaping permit application

Owner Information

Owner Name:	_____	Phone:	_____
	<i>First</i> <i>Last</i>		
		Email:	_____

Applicant Information

Applicant Name:	_____	Phone:	_____
	<i>First</i> <i>Last</i>		
Applicant Signature:	_____	Email:	_____
	<i>Signature</i>		
		Date:	_____

I CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS TRUE AND CORRECT, AND THAT ALL WORK PERFORMED UNDER THIS PERMIT SHALL CONFORM TO ALL APPLICABLE CODES, LAWS, AND ORDINANCES.

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Property Information

Property Address: _____

Lot: _____

Block: _____

Subdivision: _____

Tax Map Number: _____

Plat Book: _____

Lot Demensions: _____

Area: _____

Zoning District: _____

Applicant signature: _____

I certify that the information on this application is true and correct, and that all work performed under this permit shall conform to all applicable codes, laws, and ordinances

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FOR STAFF USE ONLY

Date Submitted:

Permit #

Reasons for Disapproval:

Is this a resubmittal?

Yes

No

Original Permit #

Approval:

Date:

Conditions of Approval:

CODE COMPLIANCE INSPECTION

Approval:

Date: