



RICHLAND COUNTY BOARD OF ZONING APPEALS APPLICATION CHECKLIST

A completed application package must be received by the Zoning Division no later than 5:00 pm on the 1st working day of the month to be eligible for the following month's Board of Zoning Appeals meeting. An application is not complete unless ALL applicable checked items and associated fee are provided.

- Completed application
- Completed Information Sheet
- A scaled drawing or plat of the parcel, which shall include any buildings or structures which are the subject of the request
- Other, as determined by the zoning office.

Deferrals for all special exceptions, variances or administrative reviews will cost an additional 50% of the initial fee.

Initial: _____

All fees are nonrefundable

- Special Exception \$52.66
- Variance \$105.31
- Administrative Review \$105.31

I hereby certify that I have read this application and the information supplied herein is true and correct to the best of my knowledge. I agree to comply with all applicable County Ordinances and State Laws related to land development. I am the property owner, or his/her authorized agent of the subject site(s). **I understand that falsifying any information herein may result in nullification of this request.**

Property owner or authorized agent

Date

If you are in need of additional information, the staff of the Richland County Planning Department may be contacted at: (803) 576-2190 _____

Received _____

Initial: _____

Date: ____/____/____



BOARD OF ZONING APPEALS

NOTICE OF APPEALS



Receipt # _____	Appeal # _____	Fee Paid \$ _____
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The form must be completed on a hearing on appeal from action of a zoning official, application for a variance, or application for special exception. Entries must be typed or printed legibly in dark ink. 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.

A copy of an accurate, legible site plan showing property dimensions and locations of all structures and improvements must be attached to an application for variance or special exception.

The Applicant hereby appeals (as stated on attached form):

- Administrative Review
 Variance
 Special Exception

Applicant(s): _____

Address: _____

Telephone: _____
 E-mail: _____

Property Owner(s) [if other than Applicant(s)]: _____

Address: _____

Telephone: _____
 E-mail: _____

Address of Property for Board Consideration: _____

Zoning District: _____ TMS: _____

DESIGNATION OF AGENT

[Complete only if property owner is not applicant]

I (we) hereby appoint the applicant(s) as my (our) agent to represent me (us) in this application.

 Name (Print or Type)

 Signature of Applicant(s)

 Date

I (we) certify that the information in this application and the attached forms are correct.

 Name (Print or Type)

 Signature of Owner(s)

Any previous requests for same variance/special exception

Yes No If "yes", Case No. _____ Date _____

If you are in need of information or general correspondence, the staff of the Richland County Planning Department may be contacted at: BOZA@RICHLANDONLINE.COM.



BOARD OF ZONING APPEALS

SPECIAL EXCEPTION



1. Location: _____

TMS Page: _____ Block: _____ Lot: _____ Zoning District: _____

2. The Board of Zoning Appeals is requested to consider the granting of a special exception permitting:

3. Describe the proposal in detail: _____

4. Area attributed to the proposal (square feet): _____

5. Are other uses located upon the subject property? No Yes (if Yes, list each use and the square footage attributed to each use):

a. Use _____ square footage _____

b. Use _____ square footage _____

c. Use _____ square footage _____

6. Total number of parking spaces on the subject property: _____

7. Total number of employees on shift of greatest employment: _____

8. Address the following **Standards of Review** (Sec. 26-56 (f) (2) of the Richland County Land Development Code). Please note that the members of the Board of Zoning Appeals will use your answers, among other things, as they evaluate your request.

a. Traffic impact: _____

b. Vehicle and pedestrian safety: _____

c. Potential impact of noise, lights, fumes or obstruction of airflow on adjoining property: _____

d. Adverse impact of the proposed use on the aesthetic character of the environs, to include possible need for screening from view: _____

e. Orientation and spacing of improvements or buildings: _____



RESTRICTED COVENANTS AFFECTING PERMIT ACTIVITY



I, _____, am the Applicant for a _____ permit for the purpose of _____, and I hereby truthfully disclose that, to the best of my personal knowledge, the tract or parcel of land subject to said permit:

_____ is restricted by a recorded covenant that is contrary to, conflicts with, or prohibits the activity for which this permit applies.

_____ is NOT restricted by a recorded covenant that is contrary to, conflicts with, or prohibits the activity for which this permit applies.

I further understand and agree that unless stated above, Richland County does not have actual notice of any recorded covenant that is contrary to, conflicts with, or prohibits the activity for which this permit applies. Applicant therefore agrees to indemnify and hold harmless Richland County from any Liabilities resulting from any Claims in the event that the permitted activity is found to be in violation of a recorded covenant.

As used herein:

- (1) 'actual notice' is not constructive notice of documents filed in local offices concerning the property, and does not require Richland County to conduct searches in any records offices for filed restrictive covenants;
(2) 'permit' does not mean an authorization to build or place a structure on a tract or parcel of land; and
(3) 'restrictive covenant' does not mean a restriction concerning a type of structure that may be built or placed on a tract or parcel of land."

SIGNATURE OF APPLICANT

PRINTED NAME OF APPLICANT

ADDRESS

CITY/STATE/ZIP

DATE