

PROPOSED
ZONING AMENDMENT

City of Forest Acres

SOUTH CAROLINA 29206

Application No _____ Date Received _____ Fee Paid _____

To The Honorable Mayor and City Council:

The undersigned hereby respectfully requests that the CITY OF FOREST ACRES Zoning Ordinance be amended as described below:

- (1) This is a request for a change in the : (check one)
() Zoning Map (fill in items #2, 3,4,5, and 8 only)
() Zoning Text (fill in items #6 and 8 only)
() Zoning schedule of District Regulations (fill in items #7 and 8 only)
- (2) Give either exact address, or tax map reference for property for which you propose a zoning change: _____

- (3) How is this property presently zoned? (check one) ()R-1 ()R-1a ()R-2 ()R-3
()C-1 ()C-2 ()Ca ()C-3 ()C-4 ()P-1 ()P-2 ()PDD

- (4) What new zoning do you propose for this property? (check one) ()R-1 ()Ra ()R-2
()R-3 ()C-1 ()C-2 ()C-2a ()C-3 ()C-4 ()P-1 ()P-2 ()PDD

* UNDER ITEM #8 EXPLAIN WHY THIS AREA SHOULD BE ZONED AS YOU PROPOSE

- (5) Does the applicant own any of the property proposed for this zoning change?
() YES () NO. If YES, give address of the property involved which he owns.

- (6) If this involves a change in the Zoning Text, what section or sections will be affected?
Section (s) _____

* SHOW PROPOSED CHANGE AND THE REASONS THEREFOR UNDER ITEM # 8

- (7) If this involves a change in the Schedule of District Regulations, what Column (s)
_____ District _____

* SHOW PROPOSED CHANGE AND THE REASONS THEREFOR UNDER ITEM #8

- (8) Explanation: _____

(if more space is needed, use a blank sheet of paper and attach))

It is understood by the undersigned that while this application will be carefully reviewed and considered, the burden of proving the need for the proposed amendment rests with the applicant.

Date _____, 19____

Signed by _____

Phone _____

Address _____