

FLORENCE COUNTY/MUNICIPAL ZONING COMPLIANCE CERTIFICATION
FOR
SPECIAL USE PERMIT
Florence County

5/06/02

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. 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 Florence or Johnsonville, the Town of Olanda, Quinby, Scranton or Timmons ville
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 Consolidated 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/Municipal 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/Municipal 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: _____