



City of Clemson

PC

PLANNING & CODES ADMINISTRATION

1250 Tiger Blvd, Suite 4 • Clemson, SC 29631-2662 • (864) 653-2050 • Fax (864) 653-2057 • www.cityofclemson.org

PLANNING COMMISSION ZONING AMENDMENT APPLICATION

Please complete in ink and return to the Planning and Codes Administration Department with required attachments, information, and filing fee. Zoning Map Amendment (Rezoning) applications require a filing fee of \$175, a current survey of the property, a copy of the deed, and a designation of agent if owner is not the applicant. **Both sides of this application must be completed; incomplete applications will not be accepted.**

- An amendment to the zoning ordinance text or the zoning map may be initiated by the city council, the planning commission, or the board of zoning appeals.
- An amendment to the zoning map for changing a zoning district designation of property may be initiated by the owner of the property affected or by an agent authorized by the owner in writing.

2015-R-12

File no.: R - - PIN: 4054-18-32-7189 Date submitted: 03/23/15 ^{paid} Planning Commission meeting date: April 13/2015

Amendment type: Map amendment (Rezoning) Text amendment

Initiated by: Owner/Agent City Council Planning Commission Board of Zoning Appeals

OWNER(S) INFORMATION

Last name: Property Quest LLC First: Michael Middle: Newton Interest: Sole owner Co-owner

Mailing address: 114 Shadowood Drive City: Clemson State: SC ZIP Code: 29631

Daytime phone no.: (864) 304-5333 Fax no.: (864) 653-5878 E-mail: mike.newton1@bellsouth.net

APPLICANT INFORMATION

To be completed only if Owner is not Applicant:

Applicant's last name: First: Middle:

Mailing address: City: State: ZIP Code:

Daytime phone no.: Fax no.: E-mail:

PROPERTY INFORMATION

THE OWNER/APPLICANT HEREBY REQUESTS that the property described below be rezoned from CP2 to RM4

Property address: 209 Kelly Road Property dimensions: Property area: 1.65 Ac ±

DESIGNATION OF AGENT

To be completed by Owner(s) only if Owner is not Applicant. All owners must sign.

I (we) hereby appoint the person named as Applicant as my (our) agent to represent me (us) in this request for a zoning map amendment.

Owner name: Michael E Newton Owner signature: [Signature] Date: 3-23-15

To be completed by Applicant:

I certify that the information in this request is correct.

Applicant name: Michael Newton Applicant signature: [Signature] Date: 3-23-15

REQUIRED INFORMATION

REASONS FOR ZONING AMENDMENT REQUEST: I (we) request the rezoning for the following reasons:

So that property meets current usage. Possible tear down rebuild.

Use additional sheets if necessary.