

Office Use Only:

Application #:

Payment Method: Cash___ Check___ Credit Card___ Amount \$_____ Date Paid_____

Zoning Application

Note: Application will not be considered until all required submittal components listed have been completed

Applicant's Name: Palmetto State Armory Phone: (803) 309-5085
Applicant's Mailing Address: 3850 Fernandina Rd. Columbia, SC 29210

Property Information:

Property Location: 9610 Pineville-Matthews Rd. Pineville, NC
Property Owner's Mailing Address: 3850 Fernandina Rd. Columbia, SC 29210
Property Owner Name: 9610 Pineville-Matthews, LLC. Phone: (803) 309-5085
Tax Map and Parcel Number: # 20709502 Existing Zoning: B-4

Which are you applying (Check all that apply):

Rezoning by Right ___ Conditional Zoning ___ Conditional Rezoning ___ Text Amendment X

Fill out section(s) that apply:

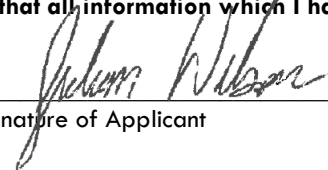
Rezoning by Right:
Proposed Rezoning Designation _____

Conditional Zoning:
Proposed Conditional Use _____
Acreage _____ Square Feet _____ Approximate Height _____ # of Rooms _____
Parking Spaces Required _____ Parking Spaces Provided _____ ****Please Attach Site Specific Conditional Plan**

Conditional Rezoning:
Proposed Conditional Rezoning Designation _____

Text Amendment:
Section 2.4 and 6.4.2 Reason To allow gun range that was not expressly permitted by the existing zoning.
Proposed Text Change (Attach if needed) See attached.

I do hereby certify that all information which I have provided for this application is, to the best of my knowledge, correct.


Signature of Applicant

Sept. 14, 2023
Date

Signature of Property Owner (If not Applicant)

Date

Signature of Town Official

Date