Zoning Comments

Date filed: _____ **Comment No. _____**

Instructions

All comments and requests will be submitted to the Planning Commission and Orangeburg County Council for review.

SUBJECT: _____

COMMENTS OR REQUEST: _____

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APPLICANT(S) Name [please print]: _____
Address: _____
Telephone: _____ [work] _____ [home]
County Council District in which you reside: _____

[Use reverse side if more space is needed.]

PROPERTY ADDRESS: _____
Lot _____ Block _____ Subdivision _____
Tax Map No. _____ Plat Book _____ Page _____
Lot Dimensions _____ Area _____
Zoning District _____