



# BERKELEY COUNTY

## PLANNING AND ZONING DEPARTMENT

Alison Simmons, AICP, Director

P.O. Box 6122

1003 Highway 52

Moncks Corner, SC 29461

### **ZONING VERIFICATION LETTER (ZVL) REQUEST**

<b>NAME (OF PERSON REQUESTING VERIFICATION):</b>	<b>PHONE NUMBER:</b>
<b>PREFERRED MEANS TO RECEIVE ZVL:</b>  <input type="checkbox"/> <b>EMAIL LETTERS WILL BE RETURNED VIA THE EMAIL ADDRESS PROVIDED UNLESS REQUESTED OTHERWISE.</b>  <input type="checkbox"/> <b>POSTAL MAIL IF YOU WISH FOR YOUR LETTER TO BE RETURNED BY POSTAL MAIL OR PREPAID OVERNIGHT COURIER, PROVIDE A SELF-ADDRESSED, POSTAGE-PAID ENVELOPE.</b>	<b>EMAIL ADDRESS (A VALID EMAIL ADDRESS IS REQUIRED. PLEASE WRITE LEGIBLY):</b>  <b>MAILING ADDRESS:</b>
<b>PROPERTY TAX MAP/ TMS NUMBER(S) (USE ADDITIONAL SHEETS IF NEEDED):</b>	<b>PROPERTY ADDRESS (PHYSICAL LOCATION OF PARCEL SUBJECT TO REQUEST. IF THE PARCEL HAS NO ASSIGNED ADDRESS, CONTACT GIS/ADDRESSING TO OBTAIN ONE.):</b>
<b>NUMBER OF PARCELS SUBJECT TO REQUEST</b>	
<b>REASON FOR REQUEST (E.G., DAY CARE, SELLING PARCEL, ETC.)</b> <hr/> <hr/> <hr/>	
<input type="checkbox"/> <b>PAYMENT ENCLOSED</b>	<b>PAYMENT TYPE:</b> <input type="checkbox"/> <b>CASH AT COUNTER</b> <input type="checkbox"/> <b>CHECK (NUMBER _____)</b>

**YOUR REQUEST WILL BE PROCESSED AS SOON AS PRACTICAL, NORMALLY WITHIN SEVEN BUSINESS DAYS. REQUESTS WILL NOT BE PROCESSED UNTIL THE REQUIRED \$5.00 FEE (PER PARCEL) IS RECEIVED.**

To avoid delays, ensure that your fee is included along with this form. Overnight courier requests will only be honored when prepaid postage envelopes are included with your request.

Cash payments are accepted at the address above (do not mail cash). Checks are also accepted, payable to Berkeley County, by mail or in person.

This request form is intended for confirmation of a property's zoning district. Should you have further questions concerning building permits, code violations, non-conforming uses or otherwise, please contact the appropriate staff for inquiries.

For staff use only:

Payment Received Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Payment Method: \_\_\_\_\_