



## Process for a Zoning Map or Text Amendment

**Application Fee:** \$250 Zoning Map or Text Amendment  
**PUD Application Fee:** \$500 plus \$5 per acre

**Planning Commission:** Issue is presented to 5-member commission. The commission must make a recommendation to Town Council within 30 days.

**Council Workshop:** Town Council reviews the Council Meeting agenda.

**First Reading:** Introduction of the issue at a Council Meeting. Issue must receive a majority vote to move forward.

**Public Hearing:** Opportunity for Town Council to receive input from the public at large on the issue. No vote is taken at the public hearing.

**Second Reading:** Final vote at a Council Meeting to adopt or fail the issue.

## Meeting Schedule for Text or Map Amendment

All Meetings are held at Port Royal Town Hall – 700 Paris Ave.

<b>Planning Commission</b>	4 <sup>th</sup> Monday of month	5:00 PM
<b>Council Workshop</b>	1 <sup>st</sup> Wednesday of month	6:30 PM
<b>Council First Reading</b>	2 <sup>nd</sup> Wednesday of month	6:30 PM
<b>Public Hearing</b>	1 <sup>st</sup> Wednesday of month	6:30 PM
<b>Council Second Reading</b>	2 <sup>nd</sup> Wednesday of month	6:30 PM

**PROPOSED ZONING AMENDMENT**  
Town of Port Royal South Carolina

*Fee: \$250.00*  
*PUD: \$500.00 plus \$5.00 per acre*

To The Honorable Mayor and Town Council: The undersigned hereby respectfully request that the Town of Port Royal Ordinance be amended as described below:

- (1) This is a request for a change in the: (Check one)
  - Zoning Map (fill in items #2, 3, 4, 5, 6, and 8 only)
  - Zoning Text (fill in items #7 and 8 only)
  
- (2) Parcel ID number (PIN) and address for the property where a map amendment is proposed:  
  
District No. \_\_\_\_ Map \_\_\_\_ Parcel (s) \_\_\_\_\_  
  
Address \_\_\_\_\_
  
- (3) Area of subject property \_\_\_\_\_ Sq. Ft. or acres.
  
- (4) Current Zoning (remember to list any overlays):
  
- (5) Proposed Zoning (remember to list any overlays):
  
- (6) Does the applicant own the property proposed for this Map Amendment?  
 YES  NO

If *NO*, provide the owner's name and contact information:

- (7) Attach proposed language for proposed Text Amendment
  
- (8) Explanation of proposed Map or Text Amendment:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If more space is needed, provide attachment)

- (9) Pursuant to Section 6-29-1145 of the South Carolina Code of Laws, is this tract or parcel restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity described in this application? \_\_\_\_ Yes \_\_\_\_ No

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_