



## REZONING APPLICATION INSTRUCTIONS

All required information, as stated on the Rezoning Application Checklist, must be included to qualify as a complete application. Upon receipt, staff will review the application materials and provide feedback to the applicant of the completeness or incompleteness of the application. If the application is deemed incomplete, the applicant must submit the missing or incomplete information prior to being deemed complete. Once the application is deemed complete, the rezoning application will formally begin the rezoning process.

The following rezoning process is in effect as of March 1, 2022.

1. A pre-application meeting is encouraged if the applicant is a property owner or owner's agent to discuss the details of the request, how the request relates to the Comprehensive Plan and Future Land Use Map, and the rezoning process. Pre-application meetings may be in-person or over the phone, depending on the complexity of the request and the needs of the applicant. Contact the Planning Division at 803.909.7220 for more information or to schedule a pre-application meeting.
2. The application submittal deadline is the first Monday of the month, except on observed holidays when county offices are closed. In those cases, the deadline will be the next business day.
3. Planning staff will review the application and prepare a staff report. This report will be made available to the applicant prior to the Planning Commission meeting.
4. The Planning Commission will review the application on the second Monday of the month after the submittal deadline. Planning Commission meetings are held at 6:00 p.m. Council Chambers of the York County Government Complex, located at 6 S. Congress Street in York. Upon review, the Planning Commission will recommend approval or denial of the request. Planning Commission only makes recommendations to the County Council. The applicant is strongly encouraged to attend the Planning Commission meeting. Please be advised that this is not a public hearing and you are not guaranteed an opportunity to speak.
5. The rezoning will be advertised at least 15 days in advance within the local newspaper indicating the date and time of the public hearing; adjacent property owners within 500 feet will be mailed written notice; and the property will be posted with a rezoning sign. The Planning Department is responsible for all noticing requirements. The applicant is strongly encouraged to contact nearby neighbors and property owners personally before the application is submitted.
6. County Council addresses rezoning matters on the first and third Monday of the month at their regularly scheduled meetings. Council meetings are held in Council Chambers of the York County Government Complex, located at 6 S. Congress Street in York. The County Council must give three readings (approvals) for a rezoning request to receive final approval. The public hearing is held at first reading; however, dates are subject to change. Please check the latest Council agenda for your item's specific date and time.
7. This process takes a minimum of ninety (90) days. Written notification of County Council's final action will be mailed to the applicant and the property owner following the third reading.

8. The York County Council, York County Planning Commission, or the owner of the property can initiate a rezoning.
9. The assignment of more than one zoning district to a parcel is prohibited. Any request to rezone a portion of a parcel must include a survey of the parcel and its proposed lot lines, which shall be recorded with the York County Register of Deeds within 90 days of approval of the rezoning request.
10. Rezoning applications will not be accepted or processed when a zoning violation exists on or in the use of the land that is the subject of the requested change. The violation must be resolved before the application can be accepted, or if a violation is discovered during the processing of the application, the rezoning process will not proceed until the violation has been resolved.
11. If the proposed rezoning will resolve a zoning violation or if the County Council elects to initiate a rezoning request for a parcel(s) with a zoning violation, the application may be accepted and/or processed. In these cases, a rezoning request stays all legal proceedings in furtherance of the requested relief, unless the Planning and Development Services Department certifies to the County Council, after the rezoning application has been filed, that by reason of facts stated in the application, a stay would, in the Department's opinion, cause an imminent peril to life and property. In such cases, proceedings will not be stayed unless a restraining order is granted by the County Council or by a court of record on application.
12. If a rezoning application is denied, the property owner or the owner's agent may not initiate another application for a rezoning affecting all or part of the same parcel or lot for 12 months following denial of the request by the County Council. However, the County Council may initiate rezoning affecting the same parcel or lot, or any part thereof, within this 12-month period.

Need help with the application? Contact the Planning Division at 803.909.7220

<b><u>Application Type</u></b>	<b><u>Fee Amount</u></b>	<b><u>Notes</u></b>
Rezone to Base District (except AGC or RUD)	\$500 + 50 per acre	\$5,000 max fee Round up to full acre
Rezone to AGC or RUD	\$500 + 50 per acre	\$2,500 max fee Round up to full acre
Rezone from UD District	No fee	
Rezone to Special District	\$1,500 + 50 per acre	Round up to full acre
Special District – Major Change	\$1,500	
Special District – Minor Change	\$250	
Development Agreement Review	\$1,500	

**Application Submittal:**

**Office Location**  
18 W. Liberty Street  
York, SC 29745

**Mailing Address**  
York County Planning Division  
PO Box 96  
York, SC 29745

## APPLICATION GUIDE

**APPLICANT:** This person will represent the property owner at the public hearing and be the point of contact throughout the process. The applicant can also be the property owner or authorized representative.

**PROPERTY OWNER:** The person(s) listed with the tax assessor as the property owner(s). If property owner includes "et al", include all owner names from the most recent deed. All owners must sign the rezoning certification form. Applications with deceased property owners will need to include a personal representative appointment letter from the probate court, and a will or order from the probate court authorizing the sale or division of the property.

**PROPERTY ADDRESS:** Provide the official address of the property proposed to be rezoned. The address can be obtained from the York County Addressing Department at 803.909.7483.

**PROPERTY TAX MAP #:** The Tax Map Number can be found on the property tax notice or it can be obtained by calling the York County Tax Assessor at 803.684.8526.

**DEED AND PLAT OF PROPERTY:** These can be obtained from the property owner or at the Register of Deeds office at the York County Government Center. If a plat does not exist, a survey of the property or a deed that indicates property line distances (metes and bounds) will be accepted.

**LAND AREA:** Provide the size (area) of the parcel based upon the most recent survey, plat, or deed. Fill in whether all or a portion of the property are to be rezoned.

**CURRENT ZONING:** Fill in the current Zoning Classification(s) of the property. This information can be obtained through the York County's Planning Viewer online or by contacting or meeting with Planning staff.

**PROPOSED ZONING:** Fill in the requested Zoning Classification(s) that are being requested in this application.

**2035 LAND USE PLAN DESIGNATION:** Fill in the 2035 future land use designation for the property from the 2035 York Forward Comprehensive Plan. The land use designation can be obtained through York County's Planning Viewer online or by contacting or meeting with Planning staff.

**USE OF PROPERTY:** Describe in general terms the current and proposed use of the property. Example: house, vacant land, convenience store, etc.

**WATER:** Describe the type of water service available. If served by public water provide the name of the service provider. Example: private well, City of Rock Hill, etc.

**SEWER:** Describe the type of sewer service available. If served by public water provide the name of the service provider. Example: private septic, City of York.

**SCHOOL DISTRICT:** Provide the School District in which the subject property is located.

**COUNTY COUNCIL DISTRICT:** Provide the Council District in which the subject property is located.

**APPLICANT SIGNATURE:** The applicant *must* sign the form certifying the information is correct. Sign even if applicant is the owner.

**OWNER SIGNATURE:** The property owner(s) must sign this section. Notarized written authorization from the property owner(s) giving the applicant permission to act of his/her behalf can be substituted for property owner's signature. All persons with an interest in the property per the most recent deed must sign the rezoning certification form.

**REZONING PURPOSE:** Provide the purpose for your request as it applies to the selection(s) made in the first question. This can include applicable limitations posed to the subject property under current zoning.



# YORK COUNTY REZONING APPLICATION

## APPLICANT AND OWNER INFORMATION

APPLICANT NAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_  
                                WORK                                  HOME                                  MOBILE

EMAIL ADDRESS: \_\_\_\_\_

PROPERTY OWNER NAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_  
                                WORK                                  HOME                                  MOBILE

EMAIL ADDRESS: \_\_\_\_\_

## PROPERTY INFORMATION

PROPERTY ADDRESS: \_\_\_\_\_

PROPERTY TAX MAP #(s): \_\_\_\_\_

LAND AREA (ACRES) TOTAL: \_\_\_\_\_ AREA TO BE REZONED: \_\_\_\_\_

ZONING CURRENT: \_\_\_\_\_ PROPOSED: \_\_\_\_\_

2035 LAND USE PLAN DESIGNATION: \_\_\_\_\_

CURRENT USE OF PROPERTY: \_\_\_\_\_

PROPOSED USE OF PROPERTY: \_\_\_\_\_

TOTAL AREA OF PROPOSED BUILDINGS (COMMERCIAL): \_\_\_\_\_

TOTAL # OF DWELLING UNITS (RESIDENTIAL): \_\_\_\_\_

UTILITY PROVIDERS WATER: \_\_\_\_\_ SEWER: \_\_\_\_\_

SCHOOL DISTRICT: \_\_\_\_\_ COUNTY COUNCIL DISTRICT: \_\_\_\_\_

## SUPPLEMENTAL QUESTIONS

1. Please describe the purpose of the rezoning request and the project that is being proposed.

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2. Are there existing structures on the site? Yes                      No

If yes, please describe: \_\_\_\_\_

If this request is granted, will the existing structure(s) remain? Yes                      No

If this request is granted, will the use of the structure(s) change? Yes                      No

*If yes, structure(s) must meet all current building and fire codes.*

3. Does this request propose to utilize public water and sewer? Yes                      No

*If yes, municipal utility providers may require signed annexation agreements as a condition of providing services. Please contact your municipal service provider prior to submitting your application.*

## CERTIFICATION

I hereby certify that I have read this application and the information supplied herein is true and correct to the best of my knowledge. I agree to comply with all applicable County ordinances and state laws related to the use and development of the land. I further certify that I am the property owner, or his/her authorized agent, of the subject site(s). I understand that falsifying any information herein may result in rejection or denial of this request.

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APPLICANT(S) DATE

I (we) certify that I (we) are the owners of the property involved in this application and further that I (we) designate the person signing as applicant to represent me (us) in this rezoning application.

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PROPERTY OWNER(S) DATE

I certify that any relevant restrictive covenants will be adhered to concerning this rezoning request. To assist verification, I have attached the relevant restrictive covenant information.

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APPLICANT(S) DATE

**YOU MUST SUBMIT THE ORIGINAL SIGNATURES ABOVE. COPIED OR SCANNED IMAGES WILL NOT BE ACCEPTED. ATTACH OWNER'S NOTARIZED WRITTEN AUTHORIZATION IF OWNER'S SIGNATURE CANNOT BE OBTAINED. ALL PROPERTY OWNERS MUST SIGN ABOVE.**

# REZONING APPLICATION CHECKLIST

The attached application form must be filled out completely and must include the following supporting materials before a request can be accepted and considered complete:

**Pre-application meeting (optional)**

**Application fee**

**Plat or recent survey (if no recorded plat)**

**Deed**

**Preliminary site plan** (include the following items as applicable)

- Proposed and existing structures with square footage
- Parking areas
- Open space areas

**Sketch plan and detailed development plan** (Special Districts Only)

**Restrictive covenants** (provide the latest recorded copy, if applicable)

**\*\*Staff may request additional information as part of the application\*\***

## OFFICE USE ONLY

AMOUNT PAID: \_\_\_\_\_ CHECK #: \_\_\_\_\_ CASH AMOUNT: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_ RECEIPT #: \_\_\_\_\_

APPLICATION RECEIVED BY: \_\_\_\_\_

APPLICATION REVIEWED BY: \_\_\_\_\_

Any information provided on this document may be subject to the SC Freedom of Information Act and may be disclosed to third parties in accordance with applicable law.