



Sumter City-County Planning Commission

P.O. Box 1449, Sumter, SC 29151

(803) 774-1660



MINOR SITE PLAN APPLICATION

Thresholds for MINOR SITE PLANS are defined in Article 7.c.1 of the City of Sumter Zoning and Development Ordinance or Article 7.c.1 of the Sumter County Zoning and Development Standards Ordinance.

- Site located in the City of Sumter (Fee: \$125.00)
- Site located in unincorporated Sumter County (No Fee)

Project Name: _____

Project Address: _____

PART 1 – APPLICANT INFORMATION

Applicant Name: _____ Email: _____

Phone: _____

Applicant Address: _____

Street

City

State

ZIP

Property Owner Name: _____ Email: _____

Phone: _____

Property Owner Address: _____

Street

City

State

ZIP

PART 2 – PROPERTY INFORMATION

Tax Map Number: _____ Parcel Size(s): _____

Current Zoning: _____ Current Use: _____

Use of Adjacent Property: North: _____ East: _____
South: _____ West: _____

Overlay District (if applicable) Highway Corridor Protection District Airfield Compatibility District (APZ, DNL, DDZ, NA) Range Compatibility District (DNL, NA) Design Review District (Downtown, Hampton Park, Swan Lake)

Description of Proposed Development
(Include size of any proposed buildings):

((Please provide civil engineered site plan and graphics as needed))

Is this tract/parcel restricted by any covenant contrary to, conflicts with, or prohibits that activity described in this application? Yes No

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PART 3 – ADDITIONAL AGENCY COORDINATION AND PERMITTING REQUIREMENTS

Stormwater Management

Yes **No**

- Has a Stormwater Application been submitted to the appropriate Stormwater Management Permitting Agency (*City or County*)?

Please explain current status of Stormwater Permitting for this project. (*If Permits have been applied for/ issued, please include a copy with this site plan application*):

Utilities

Yes **No**

- Has availability of Gas, Electricity, Water, Telecommunications, and/or Sewer Service been confirmed for the Project?

Please explain current Utility status for this project:

Right-of-Way Encroachment

Yes **No**

- Has an Encroachment Permit Application been submitted to the appropriate Transportation Agency (SCDOT, City, or County)

Please explain current status of Right-of-Way Encroachment for this project (*If Permits have been applied for/ issued, please include a copy with this site plan application*):

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SITE PLAN FORMAT AND INFORMATION CHECKLIST		Office Use Only
<i>Please review this checklist and mark all items included prior to submitting. Incomplete applications will be returned. A pre-application meeting with planning staff is highly recommended.</i>		
Site Plan Sheets Required		
<input type="checkbox"/>	Title/Cover Sheet	<input type="checkbox"/>
<input type="checkbox"/>	Existing Conditions Survey, with Surveyor's Certification Statement	<input type="checkbox"/>
<input type="checkbox"/>	Proposed Overall Site Plan with Site Data Table	<input type="checkbox"/>
<input type="checkbox"/>	Landscaping, Bufferyard, Tree Protection and Open Space Plan	<input type="checkbox"/>
<input type="checkbox"/>	Building elevations and floor plan of all proposed structures	<input type="checkbox"/>
<input type="checkbox"/>	Grading and Erosion Control Plan	<input type="checkbox"/>
<input type="checkbox"/>	Stormwater Management Plan	<input type="checkbox"/>
<input type="checkbox"/>	Utilities Plan	<input type="checkbox"/>
<input type="checkbox"/>	Site Details	<input type="checkbox"/>
<input type="checkbox"/>	SCDOT Encroachment Plan <i>(if applicable)</i>	<input type="checkbox"/>
Formatting Requirements for All Plans		
<input type="checkbox"/>	Graphic and numeric engineering scale no smaller than 1-inch:100-feet	<input type="checkbox"/>
<input type="checkbox"/>	North arrow	<input type="checkbox"/>
<input type="checkbox"/>	Name, address, and signature of engineer, land surveyor, architect, planner, and landscape architect preparing plan(s) should be provided on the cover page. If the person preparing the plan is a design professional, also provide seal.	<input type="checkbox"/>
<input type="checkbox"/>	Location map showing location of tract with reference to surrounding properties, streets, city, and county boundaries.	<input type="checkbox"/>
<input type="checkbox"/>	Legend of any symbols or abbreviations used in the plan.	<input type="checkbox"/>
<input type="checkbox"/>	Date the plan was prepared and any subsequent revisions.	<input type="checkbox"/>
<input type="checkbox"/>	If the plan spans more than one sheet, match lines must be provided.	<input type="checkbox"/>
Site Plan Data Table Requirements		
<input type="checkbox"/>	Name and address of owner of record.	<input type="checkbox"/>
<input type="checkbox"/>	Name, address, phone number, and email address of applicant.	<input type="checkbox"/>
<input type="checkbox"/>	Primary contact(s) for project: address, email, and phone number.	<input type="checkbox"/>
<input type="checkbox"/>	Project address as assigned by E-911 (Sumter County Tax Assessors Office).	<input type="checkbox"/>
<input type="checkbox"/>	Tax Map Identification Number(s).	<input type="checkbox"/>
<input type="checkbox"/>	Identify whether the project is in the Sumter City Limits, or Sumter County.	<input type="checkbox"/>
<input type="checkbox"/>	A description of proposed use/development.	<input type="checkbox"/>
<input type="checkbox"/>	Zoning District and any applicable Overlay Districts	<input type="checkbox"/>
<input type="checkbox"/>	List minimum development requirements for applicable Zoning District and any applicable Overlay Districts (density, lot size, lot width, front, side and rear yard setbacks, building height, impervious surface, parking).	<input type="checkbox"/>
<input type="checkbox"/>	FEMA Floodplain Insurance Map Information	<input type="checkbox"/>
<input type="checkbox"/>	Size of parcel, in acres	<input type="checkbox"/>
<input type="checkbox"/>	Size of site plan area if less than entire parcel, in acres	<input type="checkbox"/>
<input type="checkbox"/>	Percentage of parcel undeveloped/open space	<input type="checkbox"/>
<input type="checkbox"/>	Size (in sq. ft.) of all existing and proposed buildings	<input type="checkbox"/>
<input type="checkbox"/>	<i>(if applicable)</i> Statement acknowledging the presence of Noise Attenuation (NA) and/or Accident Potential Zones (APZ) delineated for Shaw Air Force Base.	<input type="checkbox"/>
<input type="checkbox"/>	<i>(if applicable)</i> Statement acknowledging presence within the Sumter Airport Overlay Zone.	<input type="checkbox"/>

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PART 4 – APPLICANT AND PROPERTY OWNER/AGENT CERTIFICATIONS

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 City and/or County Ordinances and State Laws related to land development.

I am the property owner, or have received the owner’s written authorization to act as his/her agent regarding this matter.

I understand that falsifying any information herein may result in nullification of this request and/or appropriate legal remedies.

Applicant Name (*printed*) _____ Signature _____ Date _____

Property Owner or Authorized Agent Name (*if different from Applicant*) _____ Signature _____ Date _____

TO QUALIFY AS A COMPLETE APPLICATION, THE FOLLOWING REQUIREMENTS APPLY:

- Two (2) physical copies of site plans and/or design proposal documents must be included with the application.
- One (1) electronic copy of site plans and/or design proposal documents must be emailed to planningdepartment@sumtersc.gov
- The required fee must be included via cash or check, or paid in person or via phone by credit card (make checks payable to “City of Sumter”).

OFFICE USE:

Date Fee Paid _____ Amount Paid _____

Received by _____ Application Reviewed By _____

Overlay District (*if applicable*) Highway Corridor Protection District (HCPD) Airfield Compatibility District (APZ, DNL, DDZ, NA) Range Compatibility District (DNL, NA) Design Review District (Downtown, Hampton Park, Swan Lake)

Notes:

Initial Plan Review Completed By: _____ Date: _____

Plan Review Comments Sent to Applicant (date) _____

Subsequent Plan Review (if applicable) Completed By: _____ Date: _____

Subsequent Plan Review Comments Sent to Applicant (date) _____

Site Plan Approval Issued By: _____ Date: _____