

COLLETON COUNTY PLANNING AND DEVELOPMENT
 P.O. Box 98 - 31 Klein Street - Walterboro, SC 29488
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 Inspection Line # (843) 549-1844
 Website: colletoncounty.org/planning-development



**FAMILY GROUP DEVELOPMENT
 PROPERTY RESTRICTION DECLARATION**

TMS #: _____ Land Owner: _____

Property Description:

- A. Yes No Deed: Book _____ Page _____
- B. Yes No Plat: Book _____ Page _____
- C. Yes No Exhibit: Attached

I, _____, hereby acknowledge that I own or have interest by blood, marriage or adoption in the property referenced by item(s): A, B, or C **(Circle all that apply)** and petition to have this property restricted under the conditions pursuant to the Zoning Ordinance as found under the County Code of Ordinances, *Title 14: Land Management, Zoning, Section 3, Conditional Uses, Family Group Developments*.

I further acknowledge under law that this property shall not be further subdivided until and unless it can meet all requirements of the Colleton County Zoning Ordinance and Land Development Regulations which governs the subdivision of property under normal circumstances. I further acknowledge that this restriction for this property runs with the land.

Name: _____ (Please Print)
 Signature: _____ Date: _____
 Witness: _____ Witness: _____

**STATE OF SOUTH CAROLINA)
 COUNTY OF COLLETON)**

PERSONALLY appeared before me the undersigned witness, who being duly sworn, says that (s)he saw the within-named sign, seal and deliver the within Family Group Property Restrictions: and that (s)he with the other witness whose signature appears above witnessed the execution thereof.

SWORN to before me _____ day of _____, 20 _____.
 _____ (SEAL)
 Notary Public for South Carolina
 My Commission Expires: _____

PLANNING & DEVELOPMENT DEPART.

ZONING DISTRICT: _____ **MAX UNITS:** _____
EXISTING UNITS: _____ **PROPOSED UNIT #:** _____
APPROVED BY: _____
APPROVAL DATE: _____