



COUNTY OF LEXINGTON, SOUTH CAROLINA

Community Development

County Administration Building, 4th Floor
212 South Lake Dr, Suite 401 Lexington, SC 29072
(803)785-8121

ZONING WAIVER

CIRCULATION DATE: _____

APPLICANT: _____ PHONE: _____

PRINCIPAL ACTIVITY DESCRIPTION: _____

PRINCIPAL ACTIVITY LOCATION: _____

TMS#: _____

BUFFERING RESTRICTIONS and/or PERFORMANCE STANDARDS PROPOSED FOR WAIVERING:

HEIGHT - The maximum height for structures is an initial 20-foot vertical rise at the protected property lines plus an additional _____ foot of rise for each foot of setback from the protected property lines.

BUFFER – The minimum buffer distance from the protected property lines, within which no principal or accessory activity is permitted (with the exception of utilities or stormwater structures), is _____ feet.

SETBACK – The minimum setback distance for buildings or other activities from the protected property line is _____ feet.

SCREENING – Total screening is required for a principal or accessory activity within _____ feet of the protected property lines; additionally, partial screening is required for a principal or accessory activity within _____ feet of the protected property lines.

The Lexington county Zoning ordinance requires the above-described activity to conform to the listed buffering restrictions and/or performance standards for protection of the property described below. However, the owner(s) of record, as listed below, may waive all or part of the above stated protection by signing this Zoning Waiver, subject to verification by Lexington County Zoning Staff.

PROTECTED PROPERTY OWNER(S) INFORMATION:

OWNER OF RECORD: _____

PROPERTY LOCATION: _____ TMS#: _____

MAILING ADDRESS (if different from property location) _____

(See reverse side)

The undersigned owner(s) of the protected property described above hereby waive(s) all or part of the protection afforded by the above listed buffering restrictions and/or performance standards, as stated in the Lexington County Zoning Ordinance, relative to the above described principal activity. The portions of the above listed buffering restrictions and/or performance standards that are to remain in effect (if any) are as follows:

PROPERTY OWNER(S) SIGNATURE(S) DATE

PRINTED PROPERTY OWNER(S) NAME(S) PHONE #

This Zoning Waiver shall become valid only when verified and attached to an applicable Zoning Permit within 90 calendar days of the circulation date as designated on page 1 of this form. A fee for each waiver obtained, relative to this activity, is due at the time the Zoning Waiver is issued by the Zoning Office.

Questions or concerns by the protected property owner may be directed to:

Community Development – Zoning Office
Lexington County Administration Building – 4th Floor
212 South Lake Drive, Suite 401
Lexington, SC 29072
Phone: (803) 785-8121

WAIVER BECOMES VOID IF APPROPRIATE ZONING PERMIT NOT ISSUED WITHIN 90 DAYS

Is the tract or parcel of land restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the proposed activity? Yes No (Applicant's Signature) _____ Date _____

For Zoning Office Use Only

Verification Date: _____

Zoning Staff: _____ Signature: _____

Zoning Permit Date: _____ Zoning Permit #: _____

Zoning Staff: _____ Signature: _____