



TOWN OF YEMASSEE ANNEXATION APPLICATION

Yemassee Municipal Complex
P.O. Box 577
Yemassee, SC 29945-0577
(843) 589-2565
www.townofyemassee.org

Applicant		Property Owner	
Name:		Name:	
Phone:		Phone:	
Mailing Address:		Mailing Address:	
E-mail:		E-mail:	
Town Business License # (if applicable):			
Project Information			
Project Name:		Acreage:	
Project Location:			
Existing Zoning:		Proposed Zoning:	
Tax Map Number(s):			
Project Description:			
Select Annexation Method			
<input type="checkbox"/> 100 Percent Petition and Ordinance Method <input type="checkbox"/> 75 Percent Petition and Ordinance Method <input type="checkbox"/> 25 Percent Elector Petition and Election Method			
Minimum Requirements for Submittal			
<input type="checkbox"/> 1. Completed Annexation Petition(s) <input type="checkbox"/> 2. Copy of plat and/or survey of area requesting annexation			
Note: Application is not valid unless signed and dated by property owner.			
Disclaimer: The Town of Yemassee assumes no legal or financial liability to the applicant or any third party whatsoever by approving the plans associated with this permit.			
I hereby acknowledge by my signature below that the foregoing application is complete and accurate and that I am the owner of the subject property.			
Property Owner Signature:		Date:	
Applicant Signature:		Date:	
For Office Use			
Application Number:		Date Received:	
Received By:		Date Approved:	