



**TOWN OF YEMASSEE
PUBLIC PROJECT APPLICATION**

Town of Yemassee
Administration Department
101 Town Cir
Yemassee, SC 29945-3363
(843) 589-2565 Ext. 3
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:		<input type="checkbox"/> New	<input type="checkbox"/> Amendment
Project Location:		Acreage:	
Zoning District:			
Tax Map Number(s):			
Project Description:			
Minimum Requirements for Submittal			
<input type="checkbox"/> 1. Two (2) full sized copies and digital files of the Preliminary or Final Public Project Plans.			
<input type="checkbox"/> 2. Recorded deed and plat showing proof of property ownership (if procuring easements).			
<input type="checkbox"/> 3. Project Narrative describing reason for application			
<input type="checkbox"/> 4. Tax Map Numbers for any properties to be served by the Project (map or listing)			
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			
Property Owner Signature:		Date:	
Applicant Signature:		Date:	
For Office Use			
Application Number:		Date Received:	
Received By:		Date Approved:	