Zoning Permit Application



City of Cayce South Carolina

		1930E DATE:			
The applicant hereby requuse the property describe detail):					
USINESS					
Name					# of Employees
Address					
ROPERTY OWNER					
Name					
Address					
Phone		Email			
PPLICANT		<u>.</u>			
I certify that the information in	this request is correc	t.			
Name [print]		Signature			Date
Address	Ph	none		Email	
FOR P&D OFFICE U	ISE				
TMS #	Zoning	Issued	Bv	Date	<u> </u>
		locaoa			
ApprovedDenied [Reason]	Ву:			Date	•
NAICS CODE					
Code #	Classific	ation			
FOR FINANCE OFF	ICE USE				
Receipt #	Da	Date		siness License	Fee

THIS PERMIT IS NOT VALID UNTIL THE BUSINESS LICENSE FEE HAS BEEN PAID.