

Our #1 Priority is Emergency Response Time

DESCRIPTION

A valid street address is required to apply for a building or zoning permit. If your property does not yet have an address, application can be made through the Planning and Zoning Department. Addresses are assigned by the Planning Department in consultation with 9-1-1 services.

PROCESS

- Submit Address request form and supporting information to the Planning Department;
- Owner will be notified of address assignment by letter.

INFORMATION TO PROVIDE

Completed *Address Request* form with the following attachment(s):

- For Existing lots: Copy of recorded plat (can be obtained from BerkeleyCounty Register of Deeds, if available);
- For Newly Subdivided Lot: Recorded copy of City of Goose Creek approved plat;
- For Apartments/Malls: Floor plan/store layout;
- For new tenant space within an existing building: Building floor plan showing the layout of suites, units, etc., include all existing addresses.

TIME

3-5 Days. Possibly longer depending on circumstances.

CONTACTS

Planning and Zoning 519 N. Goose Creek Blvd Goose Creek, SC 29445 Phone: (843) 797-6220 Joseph Morris Planner II ext. 1131 Samuel Brander, GIS Coordinator ext. 4270 planning-zoning@cityofgoosecreek.com

Berkeley County Register of Deeds – *To obtain copy of recorded plat (If available)* 1003 US Highway 52 Moncks Corner, SC 29461 Phone: (843) 719-4084 www.berkeleycountysc.gov

<u>Note</u>¹: Corner lot addresses are assigned for Residential properties depending on which street the front door faces; Commercial properties depend on the driveway location or street frontage. <u>Note</u>²: Street names and addresses for new subdivisions are assigned during the subdivision plat process.

Note³: For street name changes, contact the Planning and Zoning Department

ADDRESS REQUEST APPLICATION

CITY OF GOOSE CREEK PLANNING & ZONING DEPARTMENT
519 N. Goose Creek Blvd, Goose Creek, SC 29445 • 843-797-6220

Joseph Morris, Planner II ext 1131

Samuel Brander, GIS Coordinator ext. 4270

Email: planning-zoning@cityofgoosecreek.com

ALL APPLICABLE FIELDS MUST BE COMPLETED!!!

7	
DATE	
IS THIS A (check one):	☐ New Address Assignment ☐ Address Verification Letter Only
REQUESTOR INFORMATION	NAME: ADDRESS: TEL: FAX: E-Mail:
PROPERTY OWNER INFORMATION	NAME: ADDRESS: TEL: FAX: E-Mail:
TMS #(s)	
SUBDIVISION NAME	
PHASE	LOT(s)
STREET NAME	
PROPERTY DESCRIPTION	□ New Subdivision□ New Subdivided Lot□ New Combined Lot□ Existing Lot□ Other
STRUCTURE	☐ No Structure ☐ Existing Structure ☐ New Structure
STRUCTURE TYPE/USE (check one)	 □ One Family Residence □ Two Family Residence □ Multi-Family Building □ Multi-Family Complex □ Commercial Building □ Commercial Building Complex □ New tenant space in existing structure □ Other (explain below)
SIGNATURE	