

## **PROCEDURES FOR A BUSINESS LICENSE CLEARANCE FORM**

*(Form must be filled out completely by applicant)*

- ✚ Return form to the Business License Department.
- ✚ Form will be disbursed by the Business License Department to the Zoning Department, Building Inspector, Fire Inspector and if applicable the Health Department.
- ✚ Once the form has been returned to the Business License Department, you will be notified by this department as to the results of the clearance form.
- ✚ If your form is approved, you will need to come in and complete the Business License application and pay the appropriate fees.
- ✚ If your form is disapproved, you will be notified and told which department disapproved your request and who you may contact for additional information on their decision.

### **➤ PLEASE NOTE:**

This procedure could take up to a week or more. Please be patient with us so that we may investigate your request properly and provide you with the correct information.

**An incomplete form may result in nullification of form.**

If you have any questions you may contact the Business License Department at 803-485-2525 Ext. 100

# **BUSINESS LICENSE CLEARANCE FORM**

10 Main Street \* P.O. Box 217  
Summerton, SC 29148\* (803) 485-2525

Clearance forms are required for all businesses physically located in the Town limits of Summerton, SC. For any new business, or change of location for an existing business, you should complete this form and return it to the Business License Office.

Date: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Business Owner(s): \_\_\_\_\_

\_\_\_\_\_

Street Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Type of Building:  Residence  Store  Office Building  Warehouse

- ◆ We have taken your application to operate a business in the Town of Summerton. However, before a license can be issued, it will be required to get the necessary approvals. Approvals needed depend upon the location and nature of your business.
- ◆ In the event of a change in location or ownership of a business, the same procedure shall be followed within (10) days of change.
- ◆ If for some reason you have a problem, please do not hesitate to call our office at (803) 485-2525 Ext. 100

**\*\*\*Notice: You should confirm that no restrictive covenants are on this property which would limit your right to perform the activity for which you seek approval. If such restrictive covenants do exist, surrounding property owners may be able to have a court stop your activity even if the Town grants you a license to perform the contemplated activity. In granting this license, the Town does not attempt to determine if there are restrictive covenants. That is the sole responsibility of the applicant. I further state that I have provided the above information and that it is true and correct. I also state and agree to abide by all laws, codes and regulations of the Town of Summerton and the State of South Carolina.**

**The acceptance of this application for review and payment of fees does not constitute the approval of this application. Approval is granted only upon the receipt of business license. This application is not a license \_\_\_\_\_...INITIAL HERE**

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**Print Name/Position**

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**Signature**

**Date**

**FOR OFFICE USE ONLY**

(1) **Zoning** .....803-485-2525 Ext. 102

Tax Map # \_\_\_\_\_ Zone \_\_\_\_\_ SIC# \_\_\_\_\_

Approved       Disapproved \_\_\_\_\_  
Signature Date

(2) **Fire Inspection**.....803-435-4075

Approved       Disapproved \_\_\_\_\_  
Signature Date

(3) **Building Inspection**.....803-435-2349

Approved       Disapproved \_\_\_\_\_  
Signature Date

**COMMENTS:**

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