



DARLINGTON COUNTY OFFICE OF E-911 ADDRESSING

1 PUBLIC SQUARE, ROOM 405 * DARLINGTON, SOUTH CAROLINA 29532 * 843-398-4604 (p) * 843-398-4077 (f)

PROPERTY ADDRESS RELEASE FORM (OTHER)

(I/We) _____ as property owner(s) of

(Name of Property Owners)

Tax Map # _____ on _____

(Must be provided)

(Name of Road)

agree to allow _____ the right to do the following on the

(Name of Occupants/Applicants)

above property:

(I/We) also understand that receiving an address on this property does not give approval for a transfer of title on the property now or at a later time. A sales contract does not necessarily constitute the transfer of title. The parcel must have proper access to a publicly maintained road and a means of sewage disposal (septic tank or sewer) before an address will be issued to this property.

_____ personally contacted the property owner at phone # _____
(Planning/E-911 Staff Member) on _____ and they gave permission for the above activity.

Property Owner Signature

Witness Signature

Property Owner Signature

Witness Signature

Signature of Person Proposing Activity

Witness Signature

Date: _____

State of _____)
County of _____)

Affidavit

Personally appeared before me the above property owner _____

Sworn to and subscribed before me
This _____ day of _____, _____

(L.S.)

Notary Public for _____

My Commission Expires: _____