



Joel H. Evans, AICP, PLA
Zoning & Planning Director

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Lonnie Hamilton III Public Services Building
4045 Bridge View Drive
North Charleston, SC 29405

AFFIDAVIT

I, _____, certify under the penalty of perjury that I am the
(Print Name(s))

___ Property Owner, ___ Authorized Signatory, ___ Permanent Resident, ___ Short Term Rental Tenant
(check one)

of the property identified as tax map parcel identification number(s) _____

_____ located at (address(es)) _____

and I certify that this property has not been rented on a long-term basis (30 days or more) in the past twelve months.

(Signature(s)) (Date)

(Print Name(s))

For Staff use Only:
Received By _____ Date _____ Application Number _____