

ROAD NAME CHANGE PETITION AND APPLICATION

APPLICANT SECTION

Date: _____

Contact Person: _____ Phone: (_____) _____
(person filling out form)

Address: _____

City/State/Zip Code: _____

Current Road Name: _____

Alternate Road Name Choice(s):

First Choice: _____

Second Choice: _____

Third Choice: _____

NOTE: Changing the suffix of a name does not constitute an alternate choice. For example, Book Ln, Book Rd, Book Ct)

We, the undersigned property owners give permission to Richland County Development Services Department to name our road. We understand that this petition does not obligate the County in any way towards the maintenance, repair or replacement of the roadway. Also, a minimum of **75%** of the property owners possessing property that borders this private roadway must concur with the suggested names. (Attach a separate sheet if necessary)

Name of Property Owner (Signature)	Tax Map Number or existing address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

*** All signatures will be verified ***

Return Petition to: Richland County Development Services Department, Addressing Division
 P.O. Box 192, 2020 Hampton Street, Columbia, SC 29204

