

## Request for Services of Property Management Section

Please complete this form in its entirety and return to our office for processing, along with any copies of plats or tax map information to correctly identify the property in question.

Date filled out by requestor: \_\_\_\_\_

\_\_\_\_\_  
Name of Requestor

\_\_\_\_\_  
Phone Numbers

\_\_\_\_\_  
Address

\_\_\_\_\_  
Name of Property Owner  
(if different from requestor)

\_\_\_\_\_  
Phone Numbers

\_\_\_\_\_  
Address

E-mail address: \_\_\_\_\_

Explain Service(s) Requested of SCDOT:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Property is located in \_\_\_\_\_ County, in or near the city/town of \_\_\_\_\_

Property fronting on Highway Number: \_\_\_\_\_

Address (street name) of the site \_\_\_\_\_

Tax Map Number \_\_\_\_\_, SCDOT File Number \_\_\_\_\_ and Tract Number \_\_\_\_\_ (if available). If a current plat or tax map information is not available, please sketch the property and include it with this form for submittal.

Site is approximately \_\_\_\_\_ feet /miles North, South, East or West of intersecting road \_\_\_\_\_

Have you contacted SCDOT previously about this request? No \_\_\_\_\_ Yes \_\_\_\_\_  
If yes, date \_\_\_\_\_

Please submit the completed form to our office for processing.

South Carolina Department of Transportation  
Property Management Office-Room 422  
Post Office Box 191  
Columbia, South Carolina 29202-0191  
Phone 1-800-214-4495 or (803) 737-1400  
Fax 1-803-737-1403