

FORM LP

LIMITED PARTNERSHIP	Development Name: _____ City: _____, S.C.
Name of LP: _____ LP includes the following: ____For Profit ____Non-Profit Address: _____ City _____ State _____ Zip: _____ Tax ID Number: _____ or date applied for: _____	
Partners Percentage of Ownership	
1. Partner: _____ Address: _____ City, State, Zip: _____ <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner	_____%
2. Partner: _____ Address: _____ City, State, Zip: _____ <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner	_____%
3. Partner: _____ Address: _____ City, State, Zip: _____ <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner	_____%
4. Partner: _____ Address: _____ City, State, Zip: _____ <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner	_____%
5. Partner: _____ Address: _____ City, State, Zip: _____ <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner	_____%

NOTE: This form must be completed for each LLC that is involved in the proposed development. If any of the Members are Corporations, Limited Liability Companies, or Limited Partnerships then you must also complete, in addition to this form, one or more of the following, as applicable: FORM CORP, FORM LP, and/or FORM LLC. All necessary forms must be submitted so as to ascertain the Principals of the development.

FORM LLC

LIMITED LIABILITY COMPANY	Development Name: _____ City: _____, S.C.
Name of LLC: _____ LLC includes the following: ____ For Profit ____ Non-Profit Address: _____ City _____ State _____ Zip: _____ Tax ID Number: _____ or date applied for: _____	
Membership	Percentage of Ownership
1. Manager (if any): _____ Address: _____ City, State, Zip: _____	_____%
2. Member Name: _____ Address: _____ City, State, Zip: _____	_____%
3. Member Name: _____ Address: _____ City, State, Zip: _____	_____%
4. Member Name: _____ Address: _____ City, State, Zip: _____	_____%
5. Member Name: _____ Address: _____ City, State, Zip: _____	_____%
6. Member Name: _____ Address: _____ City, State, Zip: _____	_____%

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FORM CORP

CORPORATION	Development Name: _____	
	City: _____, S.C.	
Name of Corporation: _____ Corporation is ____ For Profit ____ Non-Profit		
Address: _____		
City _____ State _____ Zip: _____		
Tax ID Number: _____ or date applied for: _____		
Officers		
President: _____ Vice-President: _____		
Secretary: _____ Treasurer: _____		
Shareholders	Percentage of Ownership	
1. Name _____ Address: _____ City, State, Zip: _____	_____%	
2. Name: _____ Address: _____ City, State, Zip: _____	_____%	
3. Name: _____ Address: _____ City, State, Zip: _____	_____%	
4. Name: _____ Address: _____ City, State, Zip: _____	_____%	
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FORM CORP

CORPORATION	Development Name: _____ City: _____, S.C.
Name of Corporation: _____ Corporation is ____ For Profit ____ Non-Profit Address: _____ City _____ State _____ Zip: _____ Tax ID Number: _____ or date applied for: _____	
Officers	
President: _____ Vice-President: _____ Secretary: _____ Treasurer: _____	
Shareholders	Percentage of Ownership
1. Name _____ Address: _____ City, State, Zip: _____	_____%
2. Name: _____ Address: _____ City, State, Zip: _____	_____%
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President: _____ Vice-President: _____ Secretary: _____ Treasurer: _____	
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