



**Maintenance and Repair Request**

**Property Owner** \_\_\_\_\_

**Name & Address:** \_\_\_\_\_

\_\_\_\_\_

**Email** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Agent (if applicable)** \_\_\_\_\_  
(Note - Agent must have written authorization to act on behalf of the property owner)

**(Email)** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**This is a request to (describe specifically the area to be repaired):**

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

**Site address:** \_\_\_\_\_ **County:** \_\_\_\_\_

**Tax Map Number:** \_\_\_\_\_

**Adjacent Waterbody/Marshes of:** \_\_\_\_\_

**\*\*\*Please attach applicable drawings and photos of the structure needing repair. OCRM staff may deem a site visit necessary. This form must be completed in full in order for OCRM to process the request. Any additional information that will assist staff in fulfilling this request may be included. Incomplete requests will be returned.**

**Please submit this request to:**

**Charleston Office:** SCDHEC-OCRM  
1362 McMillan Ave, Suite 400  
Charleston, SC 29405