



# COLUMBIA POLICE DEPARTMENT

*"Policing Excellence through Community Partnerships"*

## NATURALISTIC LANDSCAPE/GARDEN REGISTRATION

*Please include with the registration: a copy of certification with an organization such as the South Carolina Wildlife Federation, Gills Creek Watershed Association, or Clemson's Carolina Yard. In lieu of certification, you must request to a site visit by Code Enforcement personnel to become compliant.*

|                                                                                                                  |  |                 |  |
|------------------------------------------------------------------------------------------------------------------|--|-----------------|--|
| <b>Section 1 – Owner Information:</b>                                                                            |  |                 |  |
| Name/Contact:                                                                                                    |  |                 |  |
| Physical Address:                                                                                                |  | City/State/Zip: |  |
| Telephone:                                                                                                       |  |                 |  |
| Email:                                                                                                           |  |                 |  |
| Signature                                                                                                        |  | Date            |  |
| Note: If Owner is not located within 45 miles of the City of Columbia, a Local Contact must be designated below. |  |                 |  |

|                                                                                                      |  |                 |  |
|------------------------------------------------------------------------------------------------------|--|-----------------|--|
| <b>Section 2 – Local Contact Information:</b> (CHECK HERE IF SAME AS OWNER) <input type="checkbox"/> |  |                 |  |
| Name/Contact:                                                                                        |  |                 |  |
| Physical Address:                                                                                    |  | City/State/Zip: |  |
| Telephone:                                                                                           |  |                 |  |
| Email:                                                                                               |  |                 |  |
| Signature                                                                                            |  | Date            |  |
| Note: Local Contact must be within 45 miles of the City of Columbia.                                 |  |                 |  |

### Section 3 – Adherence to City of Columbia Codes Affidavit

I, \_\_\_\_\_, certify under penalty of false statement, that the above information is correct and current. I further certify that the property I represent on file with this registration meets the standards as outlined in Chapter 8: Environmental Health and Sanitation of the City of Columbia's Code of Ordinances. I also understand that by signing this section I agree to submit to a site visit by Code Enforcement personnel should I not provide the required evidence of certification as outlined above.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
Signature \_\_\_\_\_ Title \_\_\_\_\_

|                                     |                                                                                                                                                                             |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Official Use Only                   | Approved <input type="checkbox"/> Denied <input type="checkbox"/> Inspection Requested (yes) <input type="checkbox"/> Certification Attached (yes) <input type="checkbox"/> |
| Received by _____ Reviewed by _____ |                                                                                                                                                                             |

MAIL OR EMAIL TO:  
**CODE ENFORCEMENT DIVISION**  
920-A Hemlock Drive, Columbia, SC 29201  
(803) 545-3430  
rentalpermits@columbiasc.gov

Revised 2/12/2025