

City of Beaufort Department of Planning and Community Development
1911 Boundary Street, Beaufort, SC 29902
Phone (843) 525-7011 / Fax (843) 986-5606
Website: www.cityofbeaufort.org

CITY OF BEAUFORT REHABILITATED HISTORIC PROPERTY / BAILEY BILL APPLICATION
PART A – PRELIMINARY REVIEW FORM

PLANNING DEPARTMENT USE ONLY: Application #: _____ Date Received: _____ Date Responded: _____	
_____ Certificate of Appropriateness Received #HR _____	_____ Project Approved
_____ Project Approved with Conditions (see attached sheet)	_____ Project Denied (see attached sheet)
_____	_____
Authorized Signature _____	Date _____

This application is used by the City to review rehabilitation work on historic properties, in accordance with South Carolina 1976 Code Sections 12-120 through 12-125, and pertinent regulations. A separate application should be submitted for each historic building, unless they were functionally-related during the historic period, in which case they can be submitted as a historic complex. Applications must include attachments as listed below and the required review fee to be considered complete. *Fee: \$150 for single family residences or duplexes; \$300 for all other properties.*

1. PROPERTY INFORMATION

Historic Name of Property (if known) _____ Parcel Id. Number: _____

Street Address: _____ Use: ___ Owner-occupied, or ___ Income-producing

Estimated project start date _____ Estimated project completion date _____

Fair market value of building* \$ _____ Estimated project costs \$ _____

Has an application for any other tax incentives been filed for this property? ___ Yes ___ No

If Yes, please describe _____

**fair market value is based on County tax assessor data OR a recent appraisal (within 45 days) by a licensed appraiser*

2. HISTORIC DESIGNATION

The property must have been designated "historic" by the local government allowing this incentive.

This building is a:

___ Contributing structure in the Historic District

___ Non-contributing structure, but over 50 years old, and in the Historic District

___ Structure located outside of the Historic District, but listed on the Beaufort County 1997 Historic Survey

Significance:

Construction Date: _____ Is this property individually listed on the National Register? ___ Yes ___ No

Describe previous major alterations or additions (give dates): _____

3. ATTACHMENTS

- The following information is needed to process your application. Please send complete information with the initial submission:
- ___ An original signed and completed Part A application;
 - ___ An original signed and completed Historic Review Board Project Application;
 - ___ Payment of \$150, for single family residences or duplexes; \$300 for all other properties – checks should be made out to the City of Beaufort
 - ___ An overall project narrative along with an itemized list describing the precise scope of work; and
 - ___ All HRB Submission Requirements (found on the Checklist, pages 8-10) including but not limited to:
 - ___ Location map showing where the building is located;
 - ___ Photographs clearly showing not only the areas to be rehabilitated, but also overall views of the building;
 - ___ Site plan, architectural floor plans and elevations of pre-rehabilitation conditions;
 - ___ Site plan, architectural floor plans and elevations of the proposed work.

4. OWNER INFORMATION

Name _____	Signature _____	Date _____
Mailing Address _____	City _____	State _____ Zip _____
Email Address _____	Primary Phone Number _____	

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5. DESCRIPTION OF PROPOSED WORK

In addition to a separate narrative and itemized project list, use the spaces below to describe the proposed work in detail. Architectural elements would include items such as: roof; exterior brick or siding; porches; exterior elevations; windows; doors; site/landscape features; entrance hall; main stair; parlors; fireplaces/mantles; floors/walls/ceilings; mechanical/ electrical/plumbing; etc. If an application has been submitted for any state or federal preservation Tax Credits, you may use a copy of the description of the proposed work from the state or federal forms for this section, but your submittal must still include the information in sections 1 through 4.

(Please feel free to make copies of this sheet. Use as many spaces as necessary to fully describe your project.)

Architectural element: _____ Approximate age: ___original___ added; if added ___date ___Interior ___ Exterior; Location: N S E W Describe feature and its condition: Photograph No. _____ Drawing No. _____	Describe work and impact on feature
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