



DEVELOPMENT REVIEW PROCESS
STAFF DEVELOPMENT DESIGN REVIEW APPLICATION

Community & Economic Development Department
1911 Boundary Street, Beaufort, South Carolina, 29902
p. (843) 525-7011 / f. (843) 986-5606
www.cityofbeaufort.org

Application Fee:
see schedule

OFFICE USE ONLY: **Date Filed:** _____ **Application #:** _____ **Zoning District:** _____
Historic District? Y N **Contributing?** Y N **Archeological Survey?** Y N

Schedule: There is no schedule for submitting a project for staff review.

Submittal Requirements: All forms and information shall be submitted digitally. In addition to a complete application form, applicants shall submit the required items according to the checklists on the subsequent page.

Pursuant to Section 6-29-1145 of the South Carolina Code of Laws, is this tract or parcel restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity described in this application? Yes No

Applicant, Property, and Project Information

Applicant Name: _____

Applicant Address: _____

Applicant E-mail: _____ **Applicant Phone Number:** _____

Applicant Title: Homeowner Tenant Architect Engineer Developer

Owner (if other than the Applicant): _____

Owner Address: _____

Project Name: _____

Property Address: _____

Property Identification Number (Tax Map & Parcel Number): _____

Date Submitted: _____

Certification of Correctness: I/we certify that the information in this application is correct.

Applicant's Signature: _____ **Date:** _____

Owner's Signature: _____ **Date:** _____

(The owner's signature is required if the applicant is not the owner.)

