DEVELOPMENT REVIEW PROCESS
PRE-APPLICATION CONFERENCE APPLICATION FORM
Community and Economic Development Department
1911 Boundary Street, Beaufort, South Carolina, 29902   *Application Fee: $0*
p. (843) 525-7011 / f. (843) 986-5606
www.cityofbeaufort.org

OFFICE USE ONLY: **Date Filed:** _____   **Application #:** _____   **Zoning District:** _____

Historic District? Y N   **Contributing?** Y N   **Archeological Survey?** Y N

Schedule: Pre-Application Conferences are held every Tuesday at 2:00 p.m. at City Hall (1911 Boundary Street), in the first-floor conference room. The deadline for applications is Tuesday, one week prior to the meeting.

Applicable Projects: A Pre-Application Conference is **required** for all new construction (except detached single-family residences), major subdivisions, zoning or Code text amendments, and short-term rentals. It is **recommended** for change of occupancy, (ex. an office use changing to a restaurant use), and any use involving food service.

Submittal Requirements: All forms and information may be submitted digitally. In addition to a complete application form, applicants are encouraged to submit all possible additional information about a project to convey the complete concept. This may include maps, site plans (to scale or dimensioned) floor plans, elevations, etc.

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   ☐ Contractor

Owner (if other than the Applicant): _____

Owner Address: _____

Project Name: _____

Property Address: _____

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

Meeting Date Requested: _____

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

Applicant's Signature: _____   Date: _____

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Required Project Information

Project Name: _____

Existing use of Site or Structure: _____

Proposed use of Site or Structure: _____

Square footage of any proposed construction: _____

Provide a brief Project Narrative and outline any specific questions you would like addressed.

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CONTACT INFORMATION – Application form & supplementary information may be submitted via email:

Attention: Julie A. Bachety, Administrative Assistant II

City of Beaufort Department of Planning & Development Services

1911 Boundary Street, Beaufort, South Carolina 29902

E-Mail: jbachety@cityofbeaufort.org: | Phone: (843) 525-7011 | Fax: (843) 986-5606