



## DEVELOPMENT REVIEW PROCESS HISTORIC REVIEW BOARD 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 attached schedule*

**OFFICE USE ONLY:** **Date Filed:** \_\_\_\_\_ **Application #:** \_\_\_\_\_ **Zoning District:** \_\_\_\_\_  
**BCAGHS Survey:**  Yes  No

**Schedule:** The Historic Review Board (HRB) typically meets the 2<sup>nd</sup> Wednesday of each month at 2pm. The complete schedule, along with the list of deadlines, may be found here - <http://www.cityofbeaufort.org/historic-review-board.aspx>

**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.

**Review Request:**  Conceptual  Preliminary  Final  Bailey Bill Approval\*  Change After Certification  
*\*Requires a Bailey Bill – Part A Preliminary Review Application Form*

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: \_\_\_\_\_

