



ALTERNATIVE DEVELOPMENT PATTERNS TND FLOATING OVERLAY MASTER PLAN

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

Application Fee: \$0

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

Site Area: _____ Meeting Date: _____

Submittal Requirements: All forms and information may be submitted digitally. In addition to a complete application form, applicants are required to submit all information as described in Section 2.8.3.B.1.a of the Beaufort Code. This includes, but is not limited to:

- Regulating Plan showing % allocation of all proposed zoning districts
- Illustrative Master Plan, complying with Sketch Plan requirements (Section 9.3.1.B)
- Neighborhood Structure Diagram
- Street Regulating Plan depicting the street network plan, block size dimensions, and Street Type corresponding to the street sections in Appendix C.5

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 (s):(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: _____

