



**TOWN OF BLUFFTON
STREET RENAMING APPLICATION**

Growth Management Customer Service Center
20 Bridge Street
Bluffton, SC 29910
(843) 706-4522
www.townofbluffton.sc.gov
applicationfeedback@townofbluffton.com

Applicant		Property Owner	
Name:		Name:	
Phone:		Phone:	
Mailing Address:		Mailing Address:	
E-mail:		E-mail:	
Town Business License # (if applicable):			
Project Information			
Existing Street Name		Proposed Street Name (in order of preference)	
		1.	
		2.	
		3.	
Street Location:			
Tax Map Number(s): R _____ ; R _____ R _____ ; R _____			
Minimum Requirements for Submittal			
<input type="checkbox"/> 1. Two (2) full sized copies and digital files of the map showing the street requested for renaming. <input type="checkbox"/> 2. Notarized Affidavit of Compliance and digital file fifteen (15) days prior to the scheduled Public Hearing. A minimum of eighty percent (80%) of the affected property owners must support the proposed street name change. <input type="checkbox"/> 3. Project Narrative and digital file describing reason for application and compliance with the criteria in Article 3 of the UDO. <input type="checkbox"/> 4. An Application Review Fee as determined by the Town of Bluffton Master Fee Schedule. Checks made payable to the Town of Bluffton.			
Note: A Pre-Application Meeting is required prior to Application submittal.			
Disclaimer: The Town of Bluffton assumes no legal or financial liability to the applicant or any third party whatsoever by approving the plans associated with this permit.			
I hereby acknowledge by my signature below that the foregoing application is complete and accurate and that I am the owner of the subject property. As applicable, I authorize the subject property to be posted and inspected.			
Property Owner Signature:		Date:	
Applicant Signature:		Date:	
For Office Use			
<i>Application Number:</i>		<i>Date Received:</i>	
<i>Received By:</i>		<i>Date Approved:</i>	



TOWN OF BLUFFTON STREET RENAMING APPLICATION PROCESS NARRATIVE

The following Process Narrative is intended to provide Applicants with an understanding of the respective application process, procedures and [Unified Development Ordinance \(UDO\)](#) requirements for obtaining application approval in the Town of Bluffton. While intended to explain the process, it is not intended to repeal, eliminate or otherwise limit any requirements, regulations or provisions of the Town of Bluffton's UDO. Compliance with these procedures will minimize delays and assure expeditious application review.

Step 1. Pre-Application Meeting	Applicant & Staff
Prior to the filing of a Street Renaming Application, the Applicant is required to consult with the UDO Administrator at a Pre-Application Meeting for comments and advice on the appropriate application process and the required procedures, specifications, and applicable standards required by the UDO.	
Step 2. Application Check-In Meeting	Applicant & Staff
Upon receiving input from Staff at the Pre-Application Meeting, the Applicant may submit the Street Renaming Application and required submittal materials during a mandatory Application Check-In Meeting where the UDO Administrator will review the submission for completeness.	
Step 3. Review by UDO Administrator & Development Review Committee	Applicant, Staff & Development Review Committee
If the UDO Administrator determines that the Street Renaming Application is complete, it shall be forwarded to the Development Review Committee (DRC). The DRC shall review the application and prepare written comments for review with the Applicant.	
Step 4. Development Review Committee Meeting	Applicant & Staff
A public meeting shall be held with the Applicant to review the DRC Staff Report and discuss the application. The Applicant will be encouraged to address comments, if any, and resubmit the application materials. The application shall be forwarded to the Planning Commission (PC).	
Step 5. Planning Commission Meeting & Planning Commission Public Hearing	Applicant, Staff & Planning Commission
The PC shall hold a Public Hearing and review the Street Renaming Application for compliance with the criteria and provisions in the UDO. The Planning Commission may approve, approve with conditions, or deny the application.	
Step 6. Issuance and Recording of Certificate of Street Renaming	Applicant & Staff
If the PC approves the Street Renaming Application, the UDO Administrator shall issue a Certificate of Street Renaming which the Applicant shall record with the Beaufort County Register of Deeds.	



**TOWN OF BLUFFTON
Street Renaming Application
Affidavit of Compliance**

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The Applicant must submit this notarized Affidavit of Compliance fifteen (15) days prior to the scheduled Public Hearing. The Affidavit must include the names of property owners affected by the change, property owners contacted, and signatures of the property owners in agreement with the change. A minimum of eighty percent (80%) of the affected property owners must be in agreement with the proposed name street name change.

We, the undersigned, request that the Town of Bluffton Planning Commission approve the renaming of a street located within its jurisdiction.

Existing Street Name _____

Proposed Street Name _____

<u>OWNER NAME (Print)</u>	<u>SIGNATURE</u>	<u>ADDRESS</u>	<u>PARCEL NUMBER</u>	<u>DATE</u>
			R / / / / /	
			R / / / / /	
			R / / / / /	
			R / / / / /	
			R / / / / /	
			R / / / / /	
			R / / / / /	
			R / / / / /	

Attach additional Pages if Necessary

Petition circulated by: _____
Printed Name

Signature Date

Notary Public- Affix Seal/Stamp

Print

Sign

Date: _____ State: _____

Commission Expires: _____