



**TOWN OF BLUFFTON
ZONING PERMIT 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			
Project Address:			
Project Location:			
Zoning District:		Acreage:	
Tax Map Number(s): R_ _ _ - _ _ _ - _ _ _ - _ _ _			
Project Description:			
Minimum Requirements for Submittal			
<input type="checkbox"/> 1. Narrative describing reason for application and compliance with applicable UDO standards. <input type="checkbox"/> 2. Zoning Permit Checklist <input type="checkbox"/> 3. Homestead Placement; multiple mobile homes are allowed on one lot in the Residential General & Agricultural General Districts only based on the density allowed in the district. <input type="checkbox"/> 4. If a named access is required, it cannot connect to another platted property. <input type="checkbox"/> 5. An Application Review Fee as determined by the Town of Bluffton Master Fee Schedule. Checks made payable to the Town of Bluffton.			
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			
Received By:		Date Approved:	
Received By:		Date Approved:	



TOWN OF BLUFFTON ZONING PERMIT 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 Unified Development Ordinance. Compliance with these procedures will minimize delays and assure expeditious application review.

Step 1. Application Submittal	Applicant
The Applicant shall submit the Zoning Permit Application and required submittal materials.	
Step 2. Review by UDO Administrator & Staff	Staff
If the UDO Administrator determines that the Zoning Permit Application is complete, it shall be forwarded to the following departments; Planning, Bluffton Township Fire District, Building Safety, Watershed Management, Beaufort-Jasper Water Sewer Authority and it shall be reviewed for compliance with the criteria and provisions in the UDO. The UDO Administrator may approve, approve with conditions, or deny the application.	
Step 3. Issue Zoning Permit	Staff
If the Zoning Permit Application is in compliance with the criteria and provisions in the UDO, the UDO Administrator shall issue the Zoning Permit.	



TOWN OF BLUFFTON ZONING PERMIT APPLICATION CHECKLIST

In accordance with the Town of Bluffton Unified Development Ordinance (UDO), the following information shall be included as part of a Zoning Permit application submitted for review. This checklist is intended to assist in the provision of the minimum documentation necessary to demonstrate compliance with the UDO. Depending on the proposal, the amount and type of documentation will vary. Upon review of the submitted application by Town Staff, additional information may be required. The use of this checklist by Town Staff or the Applicant shall not constitute a waiver of any requirement contained in the UDO. Applicants are encouraged to work closely with Town Staff in preparing any application prior to submittal.

Initial	NOTE: Depending on the activities proposed, Zoning Permit documentation will vary. At minimum, each plan must contain the General Information and Site & Existing Conditions Documentation in addition to information required for the other specific activities listed below, as applicable. Please contact Town Staff for questions and additional information.
	1. Name and address of Property Owner, if different from the Applicant.
	2. Schematic layout and design indicating: overall site configuration; roadway design type(s); lot type; setbacks; building location(s); building type(s)/use(s); building size(s); and building orientation(s) including detailed dimensions as are necessary and appropriate to demonstrate compliance with all applicable standards and requirements.
	3. Vicinity map, North arrow, graphic scale, and legend identifying all symbology.
	4. Name of county, municipality, project location, and parcel identification number(s).
	5. Signature over seal of registered engineer or landscape architect licensed to practice in South Carolina.
	6. Copies of approvals from any outside agencies, Property Owners Associations, and/or Architectural Review Boards, if applicable.
	7. Boundary survey with bearings and distances of all property lines, tract/lot acreage, location of property markers, and seal of a Registered Land Surveyor.
	8. Location, dimensions, name, and descriptions of all existing or recorded roadways, alleys, reservations, railroads, easements, or other public rights-of-way on or within 100 feet of the development property.
	9. Location, dimensions, area, descriptions, and flow line of existing watercourses, drainage structures, ditches, one-hundred (100) year flood elevation, OCRM critical line, wetlands or riparian corridors top of bank locations, and protected lands on or within a minimum of 100 feet of the development property.
	10. Emergency access provisions.
	11. Compliance with the Stormwater Management Plan Checklist.
	12. Proposed water/sewer system layout, or individual well/septic tank locations.

**SIGN AND RETURN THIS CHECKLIST WITH THE APPLICATION SUBMITTAL
ALL SUBMITTALS MUST BE COLLATED AND FOLDED TO 8-1/2" X 11"**

By signature below I certify that I have reviewed and provided the minimum submittal requirements listed above, including any additional items requested by the Town of Bluffton Staff. Any items not provided have been listed in the project narrative with an explanation as to why the required submittal item has not been provided or is not applicable. Further, I understand that failure to provide a complete, quality application or erroneous information may result in the delay of processing my application(s).

Signature of Property Owner or Authorized Agent

Date

Printed Name