#### **Zoning and Planning Department**



## **Mobile Home Zoning Permit Checklist**

If applicable (1) Hard Copy of a Site Plan is required for Private Right of Way Easement and MUST be approved by the Planning Department prior to Public Works approval.

- O Tax Map Number (Can be found on Tax Bill or provided by staff)
- O Address to be assigned by 911 addressing (in Planning Dept.)
- Tree survey -OR- Signed letter from Civil Engineer or Landscape Architect

All tree surveys shall include the name, phone number, address, signature, and seal of a licensed surveyor, landscape architect, or civil engineer registered in the State of South Carolina. The survey shall include all trees to be protected or preserved, and those scheduled to be removed, including dead and damaged trees.

- O Signed Tree Affidavit (in Planning Dept.)
- O Signed Restrictive Covenants Affidavit (in Planning Dept.)
- Signed Ingress/Egress/Private Easement Affidavit (In Planning Dept.)
- O Paid Receipt from local provider for public water & sewer -OR-
- Septic Tank Approval (from DHEC) and Well Notice of Intent (NOI) Approval Letter from DHEC
- O Affidavit signed by the property owner or by legal representative if there is existing well/septic or public water/sewer, if applicable (in Planning Dept.)
- Site Plan
  - Drawn to <u>Engineer's Scale</u>: (1"= 10', 20', 30', 40', 50' or 60')
  - Information to include in site plan:
    - 1. Property dimensions (may be found on a recorded plat, which can be obtained from the ROD Office located at 101 Meeting Street, Downtown).
    - 2. Dimensions and locations of all existing and proposed structures and improvements.
    - 3. Setbacks, driveways, lot coverage calculations (impervious/pervious surfaces and buildings.)
    - 4. Grand Trees (24' DBH or greater) that are in the footprint of a structure, except pines.
    - 5. Wetlands/OCRM Critical Line delineated, approved, stamped and signed every (5) years by Coastal Council (if applicable).
- Floor Square Footage (see below)
  - First, Second, and Third Floor, Covered Porch, Non-Covered Decks, Garage, Parking Under, Storage, Building Height, Etc. to be included on Zoning Application.
- Fee Required for Zoning Permit

Cash, Check with valid state I.D. or credit card

To submit via the online portal: https://egovweb.charlestoncounty.org/EnerGov\_Prod/SelfService#/home

# **County of Charleston**

## **ZONING PERMIT APPLICATION**

**Applicant (your information):** 

Public Services Building Planning Department 4045 Bridge View Drive North Charleston, SC 29405 Phone 843-202-7200 Fax 843-202-7222



First Name:						Last Name:						
Your Hom	ne Address:					City, Sta	ite, Zi	p:				
Phone #:						E-mail address:						
Subject I	Property	Informa	tion:									
Project Parcel ID # (PID)/ Tax Map # (TMS):												
Project Property Address with City, State & Zip Code: (Where the work will be completed)												
	for (select	-										
	New Single Family Residence				Addition				Tree Removal			
Accessory Structure				+	wer Po	le	e		Business License			
Demolition  Mobile Home (in flood zone)				-	ectrical			-	Safety Inspection			
	•				ommerc olar Pan			+	Tower			
Mobile Home (not in flood zone) Pool				+		truction			Temporary Sales			
Renovation / Alteration				+	nce/Ga							
- Remove	<i>ation // lite</i>	1411011			ince, Ga							
Construction	on Informa	tion For NE	W Const	ruct	ion (DO	NOT LIS	T EXI	STING	3):			
1 <sup>st</sup> Floor	2 <sup>nd</sup>	3 <sup>rd</sup> Floor	Attache	d o	r Drive	Detac	hed	d Covered Shed/Deck/ Pool S			Pool SQ	
SQ FT	Floor	SQ FT	Under (		_	Garage	s SQ	Porch SQ				FT
	SQ FT		FT (cı	IRCLE	ONE)	FT			FT	(CIRCLE ONE	:)	
Building	Total Hea	ted To	tal Cost o	£	Mo	bile	۸۵۵	ition	only	Lot SQ	lm	pervious
Height			nstruction					ition only led SQ FT		FT	SQ FT	
Height	eight SQ FT Construct		isti uctioi	.ioii noille		SQFI Add		Jeu SQ FI		ГІ	30 F1	
Applicant	Signature:					Date:						
Applicant	Signature.					Date.						
Official Use C	nlv:											
Ciliciai Ose C	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							<u> </u>				-
Received By:			Date:					Α	рр #:			



Joel H. Evans, AICP, PLA Zoning & Planning Director 843.202.7200 1.800.524.7832 Fax: 843.202.7222 Lonnie Hamilton, III Public Services Building 4045 Bridge View Drive North Charleston, SC 29405-7464

## **RESTRICTIVE COVENANTS AFFIDAVIT**

Ι,	_, have researched the restrictive covenants applicable to
Parcel Identification Number/s (PID #)	located at
(address/es)	, and have found that either there are no restrictive
covenants applicable to the subject prope	erty/properties or that the proposed application is not contrary to, does not
conflict with, and is not prohibited by an	y of the restrictive covenants, as specified in South Carolina Code of Laws,
Section 6-29-1145.	
(Signature)	(Date)
(Signature)	(Date)
	(Print Name)
For Staff Use Only:	
Received by Da	ate Application Number



Joel H. Evans, AICP, PLA Zoning & Planning Director 843.202.7200 1.800.524.7832 Fax: 843.202.7222 Lonnie Hamilton, III Public Services Building 4045 Bridge View Drive North Charleston, SC 29405-7464

## **ZONING & PLANNING DEPARTMENT**

## TREE AFFIDAVIT

## SINGLE FAMILY RESIDENTIAL HOMES

\_\_\_\_\_, hereby certify that proposed development at

(address):						
PID # (Parcel Identification #) / TMS # (Tax Map #):						
will be undertaken without the disturbance, alteration, removal or destruction of any require Grand Tree (24" DBH or greater) as defined in <b>Article 9.4 Tree Protection and Preservation</b> the Charleston County Zoning & Land Development Regulations Ordinance.						
Tree protective barricades shall be placed around all required trees in or n described in Article 9.4.4.B Tree Protection During Development and	*					
I assume full legal responsibility for any actions not in compliance requirements of Charleston County. I am aware that violations may reservocation of zoning and building permits, delays in issuance of certificate replacement of trees as mandated by the Board of Zoning Appeals of Plan	sult in stop work orders, e of occupancy, fines and					
(Owner / Representative Signature)	(Date)					
(Print Name)						
For Staff Use Only:						
Received by Date Application Number	·					