Zoning and Planning Department



New Single Family Residential Construction 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.)
- 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
 - * Water Availability Letters will NOT be accepted
- 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.)
- Exterior Elevation indicating building height
- O Site Plan (Electronic plans will require graphic scale on site plan)
 - Drawn to Engineer's Scale: (1"= 10', 20', 30', 40', 50' or 60') with graphic scale for reference
 - 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, setbacks, and locations of all existing and proposed structures and improvements.
 - 3. 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).
- O Floor Square Footage (see below) to be included on Zoning Application
 - First, Second, and Third Floor, Covered Porch, Non-Covered Decks, Garage, Parking Under, Storage, Building Height, Etc.
- Cost of Construction
- Fee Required for Zoning Permit

NOTE: Payments to Charleston County Zoning and Planning Department are by cash, check with a valid Driver's License, 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 Nam		Last Name:										
Your Home Address:						City, State, Zip:						
Phone #:						E-mail address:						
Subject I	Property	Informa	tion:									
Project Pa	arcel ID # (F	PID)/ Tax N	lap # (TN	1S):								
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			Business Lice			
Demolition (1.5)				+	ectrical			-	Safety Inspection			
Mobile Home (in flood zone)					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 st Floor	2 nd				r Drive	Detached Covered			ered/	Shed/Deck/		Pool SQ
SQ FT				nder Garage SQ		Garage SQ		Porch SQ		Carport		FT
	SQ FT FT (c		FT (ci	CIRCLE ONE)		FT		FT		(CIRCLE ONE)		
Building	Total Hea	ted To	tal Cost o	£	Mo	bile	۸۵۵	ition	only	Lot SQ	lm	pervious
_			nstruction							FT	SQ FT	
Height	Height SQ FT Con		istruction		Home SQ FT		Added SQ FT		ГІ	30,71		
Applicant Signature: Date:												
Applicant Signature.						Date.						
Official Use Only:												
Official OSC Only.												
Received By: Date:					App #:							



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 required Grand Tree (24" DBH or greater) as defined in Article 9.4 Tree Protection and Preservation of the Charleston County Zoning & Land Development Regulations Ordinance.						
Tree protective barricades shall be placed around all required trees in or near development areas as described in Article 9.4.4.B Tree Protection During Development and Construction.						
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	·					



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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