# **Zoning and Planning Department**

## Checklist of Requirements



## Additions, Sheds, Detached Garages, Pools, and Carports

Tax Map Number (Can be found on Tax Bill or provided by staff)
Signed Tree Affidavit (in Planning Dept.)
Signed Restrictive Covenants Affidavit (in Planning Dept.)
Site Plan

- Drawn to an Engineer's Scale: (1" = 10', 20', 30', 40', 50' or 60')
- Shall include the following details:
  - 1. Property dimensions (may be found on a recorded plat which can be obtained from the RMC office located at 101 Meeting Street, Downtown).
  - 2. Dimensions and locations of all existing and proposed structures and improvements
  - 3. Driveways, setbacks, 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 five (5) years by Coastal Council (if applicable).

Exterior Elevation with Overall Height Dimension (except for pools)
Cost of Construction/Valuation
Fee required for Zoning Permit

The first shed that is 120 sq ft or less does not require a Zoning Permit.

NOTE: All payments to Charleston County Zoning and Planning Department are by CASH, CHECK with a valid ID, or CREDIT CARD.

Please submit via our online portal:

https://egovweb.charlestoncounty.org/EnerGov Prod/SelfService#/home

## **IMPORTANT CONTACT INFORMATION:**

Planning/Zoning	202-7200
Building Services	202-6930
OCRM/Coastal Council	953-0200
DHEC/Septic/Well	953-0150
ROD (Register of Deeds)	958-4800

# **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 Naı	me:					
Your Home Address:						City, State, Zip:						
Phone #:						E-mail a	ddres	s:				
Subject	Property	Informa	ation:									
Project Pa	arcel ID # (F	PID)/ Tax l	Map # (TN	VIS):								
			-1									
Project P	Property Ad	dress wit	n City, Sta	ite 8	& Zip Co	de: (Whe	ere the	ow e	k will b	e complete	ed)	
Annlying	for (select	ONE).										
	ingle Famil	•	ce	Α	ddition				Tree F	Removal		
	ory Structu	•		_	ower Po	ole				ess License		
Demol	•			_	lectrical					/ Inspection	1	
Mobile	e Home (in	flood zon	e)	C	ommerc	ial			Towe	•		
Mobile	Mobile Home (not in flood zone)			S	Solar Panels Tem			Temp	porary Sales			
Pool				_	ite Construction							
Renovation / Alteration			Fe	ence/Ga	Gate							
Canatuusti	on Informa	tion For N	FIM Consi	<b>.</b>	tion /DC	NOTIL	TEVI	CTINI	~1.			
1 <sup>st</sup> Floor	on Informa	3 <sup>rd</sup> Floor			r Drive	Detac			ع): vered	Shed/Dec	k/	Pool SQ
SQ FT	Floor	SQ FT			age SQ	Garage						FT
	SQ FT				E ONE)	FT		FT		(CIRCLE ONE)		
D:I.di	Tatalillas	tad T	+-1 C+	- £	8.0-	la il a	اء اہ ۵	<b>!4.!</b>		1-+60	1	
Building	Total Hea		Total Cost of Construction			bile		Addition only Added SQ FT		Lot SQ FT	Impervious	
Height	SQ FT		mstructio	)[]	поше	ne SQ FT Ado		ieu S	QFI	гі	SQ FT	
Applicant Signature:				Date:								
, , , , , , , , , , , , , , , , , , ,												
Official Use Only:												
Received By:			Date:					A	pp #:			



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



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## **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 <b>Article 9.4 Tree Protection and Preservation</b> 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	·					