

Zoning and Planning Department

Short-Term Rental Property Annual Zoning Permit Application Renewal Package

Zoning and Planning Department



Short-Term Rental Property (STRP) Zoning Permit Annual Renewal Process/Checklist

Pursuant to Article 6.8 of the Charleston County Zoning and Land Development Regulations Ordinance, Zoning Permits for Short-Term Rental Properties must be renewed annually. Short-Term Rental Property renewal applications must demonstrate compliance with all current requirements of Article 6.8 of the Charleston County Zoning and Land Development Regulations Ordinance (see Article 6.8 for more information, including enforcement and penalties).

0 (Completed Short	-Term Rental	Property	Zoning F	Permit Ar	nnual Renew	al Application	Form
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- Previous year's Zoning Permit issued for the Short-Term Rental Property
- Completed and signed Restrictive Covenants Affidavit.
- Completed and signed Short-Term Rental Property Annual Renewal Affidavit
- For Limited Home Rentals, a completed and signed Owner-Occupier Affidavit and one of the following (pursuant to ZLDR Art. 6.8): documentation that the subject property is listed as the owner's legal voting address; or documentation that the subject property is listed as the address on the owner's driver's license or other government issued identification.
- For Extended Home Rental Short-Term Rental Properties in the AGR and AG-8 Zoning Districts, a completed and signed Extended Home Rental STRP Affidavit must be submitted along with one of the following: documentation that the subject property is listed as the owner's legal voting address; or documentation that the subject property is listed as the address on the owner's driver's license or other government issued identification.

Important Contact Information: Phone: Planning/Zoning 202-7200

Email: shorttermrental@charlestoncounty.org



Zoning and Planning Department Joel H. Evans, AICP,PLA, Director Lonnie Hamilton III Public Services Building 4045 Bridge View Drive North Charleston, SC 29405

843.202.7200

Short-Term Rental Property Zoning Permit Application

Type of Short-Term Rental: Limited Home Rental					
Extended Home Rental					
Commercial Guest House					
Owner Information					
First Name: Last Name:					
Mailing Address:					
Home/Cell Phone					
Email Address:					
Applicant Information (if not being submitted by owner)	8				
First Name: Last Name:					
Mailing Address:					
Home/Cell Phone:					
Email Address:					
Short-Term Rental Property Information					
Address:					
TMS #:					
Zoning:					
Type of Dwelling Unit to be used as a Short Term Rental (e.g. single-family home, principal dwelling unit, accessory dwelling unit etc):					
Maximum Number of Bedrooms to be used for Short-Term Rentals (Note: The use of 5 or more bedrooms for Short-Term Rental purposes may result in the application of building code requirements. Please speak to the Building Inspections Department regarding any potential building code requirements):					
Number of Parking Spaces Provided Onsite (required parking is 1 space per permitted bedroom plus the required parking for the applicable use):					
Maximum Number of Guest:					
Maximum Number of Nights the Short-Term Rental Property is Proposed to be Rented Per Year:					
Is the Short-Term Rental Property Owner Occupied (Circle One): Yes No					

Notes:						
	receiving a Zoning Permit for a Short-Term Rental – Lising, or providing Short-Term Rental Properties for lo	imited Home Rental, a Business License must be obtained prior to offering, odging.				
• The ad	• The advertisement of a Short-Term Rental shall include the County issued Zoning Permit Number and Business License Number.					
	ssessments of the property may change due to its partial on 843-958-4100 for further information regarding the	al use as a Short-Term Rental Property. Please contact the County Assessor's is.				
		annually, on or before December 31st of each year (see the Short-Term Rentabunty Zoning and Land Development Regulations Ordinance for details)				
Term 1		on County Building Services Department (843-202-6930) to ensure the Short- Building Code requirements. This will include applying for and receiving a				
	ne Charleston County Zoning and Land Developmements.	nent Regulations Ordinance for all Short-Term Rental Property Zoning				
		comply with the Short-Term Rental Property requirements contained in the rdinance, and that all required information has been submitted and is accurate				
Property	Owner Signature (required):	Date:				
Applican	t Signature (if not the owner):	Date:				
Amount Re		□ # Invoice Number				
Permit Spe	cialist/Planner's Signature	Date				
	SHORT-TERM RENTAL ZO	ONING PERMIT APPLICATIONS FEES				
a.	Short-Term Rental Permit: Limited Home Note that additional applications, processes, apply pursuant to the requirements for Shor contained in the Charleston County ZLDR.	and fees may \$100.00 Zaning foo				
b.	Short-Term Rental Permit: Extended Home F Note that in addition to the EHR Zoning Permit fee, Site Plan Review and Special Exception a required fees must be submitted pursuant to the and processes contained in the ZLDR. Zon EHRs will not be issued until/unless the Site application is approved and the Board of Zapproves the Special Exception application.	application and pplications and e requirements for e Plan Review \$200.00 Zoning Fee.				
c.	Short-Term Rental Permit: Commercial Gues Note that in addition to the CGH Zoning Permit fee, a Site Plan Review application (with the req be submitted pursuant to the requirements contained in the ZLDR. Zoning Permits for Cl issued until/unless the Site Plan Review applicat.	application and suired fee) must and processes \$300.00 Zoning Fee. HRs will not be				



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

I,	, 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 property/properties or	r that the proposed application is not contrary to, does not conflict
with, and is not prohibited by any of the restrict	tive covenants, as specified in South Carolina Code of Laws, Section
6-29-1145.	
<u> </u>	
(Signature)	(Date)
	(Print Name)
Explanation: Effective July 1, 2007, South Carolina Code of Laws Section written instructions provided to the applicant, if a tract with or prohibits an activity for which a permit is being so (Section 6-29-1145 is copied on the back of this page)	tion 6-29-1145 requires local governments to inquire in the permit application, or corparcel of land is restricted by a recorded covenant that is contrary to, conflicts bught.
For Staff Use Only:	
Received by Date	Application Number

- "Section <u>6-29-1145</u>. (A) In an application for a permit, the local planning agency must inquire in the application or by written instructions to an applicant whether the tract or parcel of land is restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the permitted activity.
- (B) If a local planning agency has actual notice of a restrictive covenant on a tract or parcel of land that is contrary to, conflicts with, or prohibits the permitted activity:
- (1) in the application for the permit;
- (2) from materials or information submitted by the person or persons requesting the permit; or
- (3) from any other source including, but not limited to, other property holders, the local planning agency must not issue the permit unless the local planning agency receives confirmation from the applicant that the restrictive covenant has been released for the tract or parcel of land-by action of the appropriate authority or property holders or by court order.
- (C) As used in this section:
- (1) 'actual notice' is not constructive notice of documents filed in local offices concerning the property, and does not require the local planning agency to conduct searches in any records offices for filed restrictive covenants;
- (2) 'permit' does not mean an authorization to build or place a structure on a tract or parcel of land; and
- (3) 'restrictive covenant' does not mean a restriction concerning a type of structure that may be built or placed on a tract or parcel of land."



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SHORT-TERM RENTAL AFFIDAVIT

I,	, hereby certify under the penalty of perjury that with the
submission of the attached Short-Term Rental Prop	erty Annual Renewal Application for the Short-Term Rental
Property on Parcel Identification Number/s (PID #)	located at
(address/es)	, the occupancy type of Short-Term Rental Property use
(Limited Home Rental, Extended Home Rental, or	Commercial Guest House) and the information submitted as
part of the application for the previous	year's Zoning Permit (Zoning Permit Number)
for the Short-	Term Rental Property use, has not changed in any manner
whatsoever and that the Short-Term Rental Property	use complies with the Charleston County Zoning and Land
Development Regulations Ordinance, as amended,	Article 6.8, Short-Term Rentals. I understand that additional
information may be required for the Zoning and Pla	nning Director to make a determination regarding compliance
with County regulations, and I will provide such docu	mentation immediately upon request.
(Signature)	(Date)
) I III I I I I I I I I I I I I I I I I
(P	rint Name)
For Staff Use Only:	2
Received by Date	Application Number



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OWNER-OCCUPIED STRP AFFIDAVIT (Limited Home Rental STRPs)

[,	certify under the penalty	of perjury that I/w	e have designated	
(Print Name(s))				
the property identified as tax map parcel iden	ntification number			
	-		2	
located at (address)			- A	
as my/our legal residence subject to the legal	l assessment ratio accord	ling to the records	of the County	
Assessor's Office and I/we (check at least or	ne of the following):			
Have designated the property listed above	ve as my/our legal voting	g address; or		
Have designated the property listed aborissued identification.	ve as the address on my/	'our driver's licens	e or other governmen	
			, the second	
(Signature(s))	1	(Date)		
^				
(Print Name(s))		2.0		
For Staff use Only:	71 g s see	10 ¹ 10 10		
Received Ry Date	Appli	cation Number		



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EXTENDED HOME RENTAL STRP AFFIDAVIT (ONLY FOR PROPERTIES IN THE AGR AND AG-8 ZONING DISTRICTS)

I,	, certify unde	er the penalty of per	rjury that I/we hav	e designated
(Print Name(s))				
the property identified as tax ma	p parcel identification	number		
located at (address)		*		*_ v *
is a Bona Fide Agricultural Use	as defined in the Charl	eston County Zonin	ng and Land Devel	opment
Regulations Ordinance and I/we	(check at least one of	the following):		
Have designated the propert	y listed above as my/or	ur legal voting addr	ess; or	
Have designated the propert issued identification.	y listed above as the ac	dress on my/our dr	iver's license or o	ther government
(Signature(s))	2 1 H		(Date)	
(Print Name(s))	9		= _	
For Staff use Only: Received By	Date_	Application	Number	