



ADMINISTRATIVE ADJUSTMENT APPLICATION

Community Development Department
1911 Boundary Street, Beaufort, South Carolina, 29902
p. (843) 525-7011 / f. (843) 986-5606
Email: development@cityofbeaufort.org / www.cityofbeaufort.org

Application Fee: \$50
Receipt # _____

OFFICE USE ONLY: Date Filed: _____ Application #: _____ Zoning District: _____

Submittal Requirements: In addition to a complete application form, please provide

1. A legal survey to scale of the property.
2. Other information that might justify the request.
3. Letter of approval from property owner's association (if any).

Pursuant to Section 6-29-1145 of the South Carolina Code of Laws, is this tract or parcel restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity described in this application? Yes No

Applicant, Owner and Property Information

Applicant Name: _____

Applicant Address: _____

Applicant E-mail: _____ Applicant Phone Number: _____

Owner (if other than the Applicant): _____

Owner Address: _____

Owner E-mail: _____ Owner Phone Number: _____

Property Address: _____

Property Identification Number (*Tax Map & Parcel Number*): _____

Certification of Correctness: I/we certify that the information in this application is correct.

Applicant's Signature: _____ Date: _____

Approved By: _____ Date: _____



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Required Project Information

Applicant hereby requests an Administrative Adjustment from the following provisions of the Beaufort Code (list Section numbers): _____

so that a permit may be issued to allow use of the property in a manner shown on the attached site plan, described as follows: (e.g., build a garage): _____

The standards for an Administrative Adjustment can be met according to the following criteria:

1. Compatible with surrounding land uses. Explain: _____

2. Harmonious with the public interest. Explain: _____

3. Consistent with purposes of this code. Explain: _____

