



DEVELOPMENT REVIEW PROCESS HTRC/PRE-DESIGN CONFERENCE FORM

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

Application Fee: \$0

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

Historic District? Y N **Contributing?** Y N **Archeological Survey?** Y N

HTRC/Pre-Design meetings are informational in nature and are intended to provide applicants guidance through the Beaufort Development Code process. Comments made by Staff are advisory are non-binding and shall not be interpreted as official or formal decisions on the project. Formal comments shall be provided with the Application process.

Schedule: HTRC/Pre-Design Conferences are held every Wednesday at 10:00 a.m. at City Hall (1911 Boundary Street), in the first-floor conference room. **The deadline for applications is Wednesday, one week prior to the meeting.**

Applicable Projects: A HTRC/Pre-Design Conference is **required** for all new construction (except detached single-family residences), major subdivisions, and zoning or Code text amendments. It is **recommended** for change of occupancy, (ex. an office use changing to a restaurant use), and any use involving food service.

Submittal Requirements: All forms and information may be submitted digitally. In addition to a complete application form, applicants are encouraged to submit all possible additional information about a project to convey the complete concept. This may include maps, site plans (to scale or dimensioned) floor plans, elevations, etc.

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, Property, and Project Information

Applicant Name: _____

Applicant Address: _____

Applicant E-mail: _____ Applicant Phone Number: _____

Applicant Title: Homeowner Tenant Architect Engineer Developer Contractor

Owner (if other than the Applicant): _____

Owner Address: _____

Project Name: _____

Property Address: _____

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

Meeting Date Requested: _____



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

Applicant's Signature: _____ Date: _____

Required Project Information

Project Name: _____

Existing use of Site or Structure: _____

Proposed use of Site or Structure: _____

Square footage of any proposed construction: _____

Provide a brief Project Narrative and outline any specific questions you would like addressed.

CONTACT INFORMATION – Application form & supplementary information may be submitted via email:

Attention: Julie A. Bachety, Administrative Assistant II

City of Beaufort Department of Planning & Development Services

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