

HIGHWAY COMMERCIAL DISTRICT
REQUIREMENTS FOR APPLICATION TO
McCLELLANVILLE, S.C. DESIGN REVIEW BOARD

The purpose of the McClellanville Design Review Board is to ensure development in the Highway Commercial District (HCD) of McClellanville, S.C. reflects the village character as set forth in Article V of the McClellanville Zoning and Land Development Ordinance.

The Design Review Board meets on the third Monday of each month at 7:00 PM at the Town Hall, 405 Pinckney Street, McClellanville, S.C. (phone 843 887-3712). It is strongly encouraged that applicants request and attend a pre-application meeting. Attendance of the applicant, and/or his/her representative, at the DRB meeting to present the request and answer questions, may also help to expedite review and decision by the Board. The applicant must provide the names of the immediately adjacent property owners so they may be notified of the request and meeting date. This application must be received at the Town Office no later than 11:00 AM on Thursday 11 days prior to the meeting, to be considered at the regular meeting of the Design Review Board, scheduled on the third Monday of each month. The submission deadline is published on the Town's web site at <http://www.townofmcclellanville-sc.net> or call Town Hall (843) 887-3712 for the date. Please note that Holidays may postpone the meeting 7 days, (i.e. Labor Day).

The following activities in the Highway Commercial District (HCD) require the approval of the Design Review Board:

- 1) New development of any property located within HCD (includes signs, fences, landscaping, buffering, structures).
- 2) Alterations and/or additions to existing development within HCD (includes signs, fences, landscaping, painting structures, altering structures).
- 3) Landscape plans by the Town or other public agency for publicly owned property within HCD.
- 4) Facilities plans by the Town or other public agency within HCD.

Applicants can review the Town's Zoning and Land Development Ordinance on the Town's website at <http://www.townofmcclellanville-sc.net/zord/contentss.htm> for further information or applicants should call the Town Office or come in for assistance filling out this application, as all requirements may not be necessary.

**APPLICATION FOR CERTIFICATE OF APPROPRIATENESS
McCLELLANVILLE, S. C. DESIGN REVIEW BOARD**

Date _____

1. Applicant's Name _____
Mailing Address _____
Telephone: Home (____) _____ Business (____) _____
Partner(s) Name(s) (if any) _____
Mailing Address _____

2. Site Address _____
Tax Map Number _____

3. Application for: New Development Alteration
 Sign Facility
 (Fence, Accessory, Buildings, etc.)

4. Detailed Proposal (include all applicable information as required by §5.4.14 of the
McClellanville Zoning and Land Development Ordinance.)

6. Required site plan with the following documents and/or reference materials:
- The north point, scale and date of site plan, and any revisions thereto.
 - Boundaries of the property proposed for development, the general location of all existing easements, property lines, existing streets, buildings, and other existing physical features and adjoining the project.
 - Approximate location of proposed structures, including accessory buildings, and proposed setback lines or easements.
 - Approximate location of proposed parking and service areas, pedestrian and vehicular access ways, lighting fixtures and signs.
 - General location, height, width, and material of all fences, walls, screens, buffers, plantings and landscaping proposed.
 - Drawings, including plans and exterior elevations drawn to scale with sufficient detail to show, insofar as they relate to exterior appearances, the architectural design of proposed buildings, signs, and walls.
 - A material board, demonstrating colors and textures proposed.
 - Photographs of the site location, illustrating development on contiguous properties and streetscapes.
 - Location and depth of buffer areas.
 - Location, species and diameter breast height (dbh) of existing trees.
 - Schedule of screening proposed to be planted, including location, species, caliper, height, quantities and installation details of trees, shrubs and other landscaping materials; as well as the location, height and grading details of proposed berms.
 - Tree protection plan, where applicable.
 - Location and width of proposed easements for shared access to US 17, where applicable.
 - Location and width of existing or required drainage easements, along the points of access for maintenance, as approved by the applicable agency responsible for such easements.
 - Approval letters or encroachment permits from the easement holder, where buffer areas or landscape elements are to be located in drainage or utility easements. Use of

private or public utility easements or public drainage easements for buffer areas and screening elements will require written authorization of the easement holder, with copies thereof being submitted to the Zoning Administrator prior to review of any screening plan.

Date

Signature of Applicant



Zoning Permit Application

Section 10.5.2 McClellanville Zoning and Land Dev. Ordinance
405 Pinckney Street
McClellanville, SC 29458
(843) 887-3712

Date Filed _____ \$25 Fee Paid _____

ARB/DRB District \$50 Fee Paid _____

Applicant is: Owner(s) OR (Owner is not applicant) Designation of Agent

PROPERTY ADDRESS: _____ TMS# _____ - _____ - _____

Applicant name(s) (Print): _____

Contractor(s) name: _____ McClellanville Business License # _____

Name/Address of Owner(s) (PRINT)

Name/Address of Designation of Agent:

Email _____ Phone # _____ - _____ - _____ Email _____ Phone# _____ - _____ - _____

Designation of Agent: (complete only if owner is not applicant): I (we) hereby appoint the person named as Applicant to represent my(our) interest in this request for a zoning permit.

Date: _____ Owner _____ Owner _____

Owner (print) _____ Owner (print) _____

Certification of Covenants/Restrictions: I (we) hereby certify that to my (our) knowledge, the tract or parcel of land subject to this application IS OR IS NOT restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity for which this permit is sought.

I (we) certify that the information in this request is correct.

Date:

_____ Owner _____ Owner _____

Owner (print) _____ Owner (print) _____

PROPERTY ADDRESS: _____ TMS# _____ - _____ - _____ - _____

Applicant name(s) (Print): _____

Describe scope of work proposed for property:

Proposed Lot Coverage: _____ Proposed Use: _____

Set Backs (feet): Front _____ Left _____ Right _____ Rear _____

Residential Floor Area (sq feet heated) _____ Porches/other (sq. feet unheated) _____

Building Height (feet above base flood elevation): _____

Zoning Administrator Review:

Approved Approved with conditions Disapproved

Date: _____

Zoning Administrator