



# Application Architectural Review Board

Section 12.6 and 6.9 McClellanville Zoning and Land Dev. Ordinance

Town Code 2.604- authorizes any Officer or Town employee to enter any premises to carry out Town duties.

Date Filed 1/20/26

Fee Paid \_\_\_\_\_

PROPERTY ADDRESS:

537 Pinckney ST McClellanville, SC

TMS# 766-02-00-037

Date 1/20/26

Fee - Paid:

1. Applicant's Name William Russell Tyler  
Mailing Address 121 Old Plantation Lane Moncks Corner SC 29461  
Telephone: (803) 899 5240 Email sh-r.tyler@homesc.com

2. Zoning \_\_\_\_\_

4. Detailed Description of Proposed Activity (Please specify, where applicable, the proposed type of roofing, siding, windows, doors, and foundation to be used. For a fence or sign, specify the sign or fence materials):

CONSTRUCT New House

5. Please include a simple drawing of the property, showing the location of the change or addition on the property, the scale of the proposed change, and the relative location of neighbors. See site plan

6. Owner or representative (please specify) \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Date Signature of Applicant William Russell Tyler



# Zoning Permit Application

Sections 10.5.2 and 12.6 of McClellanville Zoning and Land Development Ordinance  
PLEASE NOTE: Town Code 2.604 authorizes any Officer or Town employee to enter any premises to carry out Town duties.

405 Pinckney Street  
McClellanville, SC 29458  
(843) 887-3712

Date Filed: \_\_\_\_\_ Fee Paid: \_\_\_\_\_  
Property Address: 537 Pinckney ST  
TMS #: 766-02-00-037

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

Applicant name(s) (Print): William Russell Tyler

Contractor(s) name David Black Builders McClellanville Business License # \_\_\_\_\_

Name/Address of Owner(s): (Print)  
William Russell Tyler  
121 Old Plantation Lane  
Moncks Corner SC 29461

Email: sh-rtylex@homeSC.com

Phone: 843-899-240

Name/Address of Designation of Agent/Contractor:  
Richard Billington  
Village Custom Homes

Email: rchomesrichard@aol.com

Phone: 843-833-4039

**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.

The undersigned further confirm that all information on this application is known to be true and correct. I understand that granting of a permit does not presume to give authority to violate or cancel the provisions of any local, state or federal laws regulations. I certify that all work will be done in compliance with all applicable codes, statues and ordinances, and with the conditions of this permit; I understand that the issuance of the permit creates no legal liability, express or implied, on the town, state or county. I expressly grant the zoning administrator, or the zoning administrator's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.

Date: 1/20/26 Owner William R Tyler Owner \_\_\_\_\_  
Owner (print) William R Tyler Owner (print) \_\_\_\_\_

**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) \_\_\_\_\_

