

Zoning and Planning Department

Checklist of Requirements

Additions, Sheds, Detached Garages, Pools, and Carports



Tax Map Number *(Can be found on Tax Bill or provided by staff)*

Signed Tree Affidavit *(in Planning Dept.)*

Signed Restrictive Covenants Affidavit *(in Planning Dept.)*

Site Plan

- Drawn to an Engineer's Scale: (1" = 10', 20', 30', 40', 50' or 60')
- Shall include the following details:
 1. Property dimensions (may be found on a recorded plat which can be obtained from the RMC office located at 101 Meeting Street, Downtown).
 2. Dimensions and locations of all existing and proposed structures and improvements
 3. Driveways, setbacks, lot coverage calculations (impervious/pervious surfaces and buildings).
 4. Grand Trees (24" DBH or greater) that are in the footprint of a structure, except pines.
 5. Wetlands/OCRM Critical line delineated, approved, stamped and signed every five (5) years by Coastal Council (if applicable).

Exterior Elevation with Overall Height Dimension *(except for pools)*

Cost of Construction/Valuation

Fee required for Zoning Permit

- The first shed that is 120 sq ft or less does not require a Zoning Permit.

NOTE: All payments to Charleston County Zoning and Planning Department are by CASH, CHECK with a valid ID, or CREDIT CARD.

Please submit via our online portal:

https://egovweb.charlestoncounty.org/EnerGov_Prod/SelfService#/home

IMPORTANT CONTACT INFORMATION:

Planning/Zoning	202-7200
Building Services	202-6930
OCRM/Coastal Council	953-0200
DHEC/Septic/Well	953-0150
ROD (Register of Deeds)	958-4800

County of Charleston

ZONING PERMIT APPLICATION

Applicant (your information):

Public Services Building
 Planning Department
 4045 Bridge View Drive
 North Charleston, SC 29405
 Phone 843-202-7200
 Fax 843-202-7222



First Name:	Last Name:
Your Home Address:	City, State, Zip:
Phone #:	E-mail address:

Subject Property Information:

Project Parcel ID # (PID)/ Tax Map # (TMS):

Project Property Address with City, State & Zip Code: (Where the work will be completed)

Applying for (select ONE):		
<input type="checkbox"/> New Single Family Residence	<input type="checkbox"/> Addition	<input type="checkbox"/> Tree Removal
<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Power Pole	<input type="checkbox"/> Business License
<input type="checkbox"/> Demolition	<input type="checkbox"/> Electrical	<input type="checkbox"/> Safety Inspection
<input type="checkbox"/> Mobile Home (in flood zone)	<input type="checkbox"/> Commercial	<input type="checkbox"/> Tower
<input type="checkbox"/> Mobile Home (not in flood zone)	<input type="checkbox"/> Solar Panels	<input type="checkbox"/> Temporary Sales
<input type="checkbox"/> Pool	<input type="checkbox"/> Site Construction	
<input type="checkbox"/> Renovation /Alteration	<input type="checkbox"/> Fence/Gate	

Construction Information For NEW Construction (DO NOT LIST EXISTING):

1 st Floor SQ FT	2 nd Floor Floor SQ FT	3 rd Floor SQ FT	Attached or Drive Under Garage SQ FT (CIRCLE ONE)	Detached Garage SQ FT	Covered Porch SQ FT	Shed/Deck/ Carport (CIRCLE ONE)	Pool SQ FT

Building Height	Total Heated SQ FT	Total Cost of Construction	Mobile Home SQ FT	Addition only Added SQ FT	Lot SQ FT	Impervious SQ FT

Applicant Signature:	Date:

Official Use Only:

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Received By:

Date:

App #:



GENERAL SCOPE OF WORK

Applicant (your information):

First Name:	Last Name:

Subject Property Information:

Project Parcel ID # (PID)/ Tax Map # (TMS):

Project Property Address: (Where the work will be completed)

List of work to be completed on this project

Your Signature:	Date:
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Joel H. Evans, AICP, PLA
Zoning & Planning Director

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 that the proposed application is not contrary to, does not
conflict with, and is not prohibited by any of the restrictive covenants, as specified in South Carolina Code of Laws,
Section 6-29-1145.

(Signature)

(Date)

(Print Name)

Explanation:

Effective July 1, 2007, South Carolina Code of Laws Section 6-29-1145 requires local governments to inquire in the permit application, or in written instructions provided to the applicant, if a tract or parcel of land is restricted by a recorded covenant that is contrary to, conflicts with or prohibits an activity for which a permit is being sought.
(Section 6-29-1145 is copied on the back of this page)

For Staff Use Only:

Received by _____ Date _____ Application Number _____