

## COUNTY COUNCIL OF BEAUFORT COUNTY Beaufort County Planning & Zoning

Beaufort County Robert Smalls Complex Administration Building, 100 Ribaut Road, Room 115 Post Office Drawer 1228, Beaufort SC 29901-1228 Phone: (843) 255-2171 • FAX: (843) 255-9446

Official Use Only	
Zoning: App#	-

## **BEAUFORT COUNTY SIGN APPLICATION**

1.	Application is hereby made to ( ) erect, ( )	) alter,()repair,()move a sign at		
2.	Development/Zoning Permit #	Beaufort County Business License #		
3.	APPLICANT:	Address	Phone #	
4.	SIGN OWNER:	Address	Phone #	
5.	PROPERTY OWNER:  **Note: Written Consent of the Proper	Address  rty Owner Must Be Attached Unless the Si	Phone # gn Owner is Also the Property Owner**	
6.	DISTRICT MAP PARCEL	<b>7.</b> EMAIL ADDRESS:		
8.	TYPE SIGN: Freestanding/Monument Sign	Projection Wall	TOTAL SIGNS REQUESTED	
9.	TEMPORARY SIGN: ( ) Yes ( ) No If ye	res, date(s) being requested:(I	Note: See Division 5.6.60)	
10.	On Premise Off Premise	11. Are you replacing an existing sign?	YESNO	
12.	Illuminated ( ) Yes ( ) No. If yes, Type of illu	mination**Note: Internally Illur	minated Signs Are Prohibited in Beaufort County**	
13.	MATERIAL: Face	Frame	Support	
14.	SIZE: Height: Width:	SQ. FT.: Total Area of Sign _	( ) Single Face ( ) Double Face	
15.	NAME ON SIGN: 16. SIGN VALUE			
17.	. Are there any other signs on this property, if so indicate type, size and location.			
18.	Do you plan to include this sign in your Business	s Inventory? YES NO (	If no, you will be taxed separately for this sign).	
Divisions and issued con	ision 7.2.40.C.4. Preliminary Approval shall autom uance, unless an extension period is authorized ur inspection from the Codes Enforcement Office ue a Sign Permit to the applicant within five (5) bus inply with the Development Code or the permittee's ereby agree that if this application is approved and	natically expire if the sign installation it author nder CDC Division 7.4.130. Before Preliminar as prescribed in Division 7.2.40.C.5. The siness days of the inspection unless the sign s building permit."  It a sign permit issued, that I will comply with a	ufort County Community Development Code ("CDC") rizes is not commenced within six (6) months after its ary Approval expires, the applicant must request a Community Development Director or designee shall work is incomplete or the sign as completed fails to all requirements of the Sign Ordinance and Building I will not erect any other signs on this property unless	
SIG	SNATURE:	DATE:		
0.0	SIGN OWNER OR AUTHORIZED A	AGENT B/(TE:	Rev. 6/202	
		FOR OFFICIAL USE ONLY	1104. 0/202	
ı		Sugar Services		
Des	sign Review Board Approval	Date _		
Pre	liminary approval	Date		
Insp	pection approval	Date		
Fina	al Approval	Date	Permit Number	
Cor	nditions of Approval			
Dis	approved by	Date		
Dat	e Received:	App	lication Fee:	

## THIS SECTION IS TO BE SIGNED OFF BY THE BUSINESS LICENSE DEPARTMENT

0	Name of Sign Company:			
	Beaufort County Business License Number:			
	Business License Approval:	Date:		
0	Sign Installer (If different from Sign Manufacturer) Name of Sign Company: Beaufort County Business License Number:			
	Business License Approval:	Date:		
)	Business Information Name of Business: Beaufort County Business License Number:			
	Business License Approval:	Date:		
<b>*</b>	Please note that the Beaufort County Business License De			



## <u>APPLICATION REQUIREMENTS FOR ALL SIGNS (SEE DIVISION 7.2.40)</u>

- □ A FULLY COMPLETED AND SIGNED APPLICATION FORM. INCLUDE THE PHYSICAL 911 ADDRESS OF THE BUSINESS LOCATION.
- ACCURATE SIGN RENDERING / DRAWING OF THE SIGN, SHOWING ALL DIMENSIONS.
- □ WALL SIGNS A PHOTOGRAPH OF THE STORE FRONT ALONG WITH THE DIMENSION OF THE SIGNABLE AREA.
- □ A SITE PLAN OF THE PROPERTY, SHOWING THE LOCATION OF PROPOSED & EXISTING SIGNS.
- □ ACCURATE COLOR CHIPS OR PANTONE MATCHING SYSTEM (PMS) NUMBERS INCLUDED ON THE SIGN RENDERING.
- LIGHTING PLAN SHOWING PROPOSED LIGHTING. LIGHTING SHALL BE CUTOFF FIXTURE.
- □ APPLICATION FEE OF \$50.00 PER SIGN, CHECKS MADE PAYABLE TO BEAUFORT COUNTY TREASURER.
- ONCE APPROVAL IS GRANTED, AND UPON COMPLETION OF THE SIGN INSTALLATION, APPLICANT MUST CONTACT THE CODES ENFORCEMENT OFFICER AT 843.255.2066 TO SCHEDULE AN INSPECTION.

Note: Before any sign is erected, Staff shall review the plans and within thirty (30) days make a determination whether the sign meets the requirements. If it does, preliminary sign approval will be granted. If it does not, the person requesting the sign permit shall be notified in writing as to the deficiencies.

Appeal of any decision shall be made to the Zoning Board of Appeals within 30 days of notice of disapproval.