



CITY OF GOOSE CREEK  
 519 N. Goose Creek Boulevard  
 Goose Creek, SC 29445  
 Office: 843-797-6220  
 E-mail: [planning-zoning@cityofgoosecreek.com](mailto:planning-zoning@cityofgoosecreek.com)  
[www.cityofgoosecreek.com](http://www.cityofgoosecreek.com)

## City of Goose Creek Board of Zoning Appeals *Submittal Requirements and Checklist*

The Board of Zoning Appeals is a quasi-judicial board comprised of 5 volunteer citizens appointed by City Council. The Board reviews and makes decisions regarding special exceptions, variances, and administrative appeals. Cases are posted and advertised in accordance with Section 151.173 (C)(7), of the City Code of Ordinances and with Title 30, Chapter 4 of the Code of Laws of South Carolina.

An application must be properly filed with Planning and Zoning by 4:00 PM, 30 days prior to the anticipated date in order for the application to be scheduled for review by the Board of Zoning Appeals at a public hearing. Hearings are scheduled at 6:00 PM at City Hall, Council Chambers as arranged by City Planning to ensure a quorum.

### **\*APPLICANT TO INCLUDE THIS SHEET WITH APPLICATION SUBMITTAL\***

- Applicable sections of the Zoning Ordinance reviewed and listed correctly on application
- All sections of application completed (***please ensure all fields completed and responses are legible. Attach separate sheet if necessary***)
- Signed and witnessed Letter of Agency submitted (***If applicant not property owner***)
- Applicant signature on last page of document
- Conceptual Site Plan and/or Landscaping Plan provided to illustrate site layout, parking, landscaping, etc. (***preferably to scale***)
- Supplemental documents submitted (***i.e. Business plan, etc.***)
- Application fee remitted at time of submittal (***Please ensure project value notated on application. Checks to be made payable to City of Goose Creek***)

***\*Staff to review and sign-off on checklist at time of submittal***

Date and time submitted: \_\_\_\_\_

Staff initials: \_\_\_\_\_

#### **INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

**Applications are accepted:  
 Monday - Friday from 8:00 AM to 4:00 PM**

**SO THAT WE CAN BETTER SERVE ALL APPLICANTS: APPLICANTS MUST HAVE ALL DOCUMENTS AND PAYMENT TO ZONING BY 4:00 PM TO ENSURE PROCESSING AND SCHEDULING FOR THE CORRESPONDING PUBLIC HEARING DATE.**

An approval by the Zoning Board of Appeals only applies to Chapter 151.171 of the City of Goose Creek Code of Ordinances. The approval in no way overrides other city development regulations (i.e. building code, fire, stormwater)

<b>Office Use Only</b>	Date Received: _____	Appeal Number: _____
	Staff Initial: _____	Invoice #: _____

CITY OF GOOSE CREEK | PLANNING AND ZONING DEPARTMENT  
519 N. Goose Creek Boulevard | Goose Creek, SC 29445  
Office: 843-797-6220 ext. 1118 | E-mail: [planning-zoning@cityofgoosecreek.com](mailto:planning-zoning@cityofgoosecreek.com)  
[www.cityofgoosecreek.com](http://www.cityofgoosecreek.com)

# APPLICATION FOR ADMINISTRATIVE APPEAL

## CITY OF GOOSE CREEK ZONING BOARD OF APPEALS

<b>Property Information</b>		
Address of Subject Property: _____		
Tax Map Number(s): _____	Zoning District: _____	Overlay District: _____

<b>Applicant Information</b>		
Applicant: _____		
Name of Company (if applicable): _____		
Mailing Address: _____		
City: _____	State: _____	Zip: _____
E-mail Address: _____	Phone: _____	

<b>Are you the Property Owner?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<i>If No, please complete the following section and obtain a proper signature</i>
<i>As the property owner, I hereby appoint the above listed applicant as my agent to represent myself in this application.</i>		
Signature of Property Owner: _____		Date: _____
Print Name of Property Owner: _____		
Mailing Address: _____		
E-mail Address: _____	Phone: _____	

**APPEAL PROCEDURE:**  
Appeals to each board may be taken by any person aggrieved or by any officer, department, board or bureau of the city affected by any decision of the zoning administrator. That appeal shall be taken within 30 days by filing with the zoning administrator and with the applicable board a notice of appeal specifying the grounds thereof. The board shall hear the appeal within 30 business days, give public notice thereof as well as due notice to the parties in interest, and decide the appeal within ten business days. At the hearing, any party may appear in person or by agent or attorney.

**APPLICATION DEADLINE:**  
Applicants must fully complete applications and submit 30 days prior to the anticipated date. Any failure to submit a complete application or to provide requested documentation may result in applications being returned, withdrawn, or their case to be scheduled at a later date. An application is not complete unless all applicable sections are answered and the associated fee is provided.

<b>APPLICATION FEE:</b>	<i>Please attach the required application fee upon submittal of this application</i>	
Checks payable to: City of Goose Creek	\$60.00	

CASE #: \_\_\_\_\_

**Description of Appeal:**

*Explain your appeal request. Please provide the specific section of the City of Goose Creek Zoning Ordinance of which this appeal is requested. To find the applicable section please see Chapter 151.173 of the City of Goose Creek Code of Ordinances, which is available online at [www.cityofgoosecreek.com/government/code-ordinances](http://www.cityofgoosecreek.com/government/code-ordinances). You may attach a separate sheet if necessary.*

1. As the applicant, I (we) hereby appeal to the Zoning Board of Appeals from the action of the Zoning Administrator affecting the above mentioned property on the grounds that:

2. The above mentioned determination was erroneous and contrary to provisions of the zoning ordinance; or other action or decision of the Zoning Administrator was erroneous as follows:

3. As the applicant, I (we) have been affected by this decision in that:

4. As the applicant, I (we) contend that the correct interpretation of the zoning ordinance as applied to the property is:

5. As the applicant, I (we) request the following relief:

**By signing below, I hereby certify that I have read this application and the information supplied herein is true and correct to the best of my knowledge.**

Applicant Signature: \_\_\_\_\_ Date \_\_\_\_\_

**The Zoning Board of Appeals conducts public hearings at 6:00 PM at City Hall, Council Chambers  
519 N. Goose Creek Boulevard, Goose Creek, SC 29445**



# LETTER OF AGENCY BOARDS AND COMMISSIONS

**TO: Planning and Zoning Department, City of Goose Creek, SC**

I, the undersigned property owner, do hereby attest that I am the person that holds, or I am authorized on behalf of the party that holds, fee simple interest in the following parcel(s):

COMMON STREET ADDRESS(ES): \_\_\_\_\_

TAX MAP NUMBER(S): \_\_\_\_\_

Further, I hereby authorize the persons and/or entities listed as AUTHORIZED AGENT(S) below to act on my behalf for the purpose of submitting documents, amending documents, meeting with staff, attending public meetings and hearings, and as otherwise may be necessary and proper to fulfill the required steps to request the following:

1. Variance, Special Exception, and/or Administrative Appeal (Zoning Board of Appeals)
2. Zoning Map Amendment (Planning Commission and City Council, if applicable)
3. Site Plan Review
4. Design Review (ARB)
5. Minor Subdivision (Staff)
6. Major Subdivision

*\*\*Please strike-through and initial any of the above-listed steps that do not fall under the scope of this Letter of Agency*

Name, Company/Firm, Telephone Number

AUTHORIZED AGENT(S): \_\_\_\_\_  
\_\_\_\_\_

**Please note that the Authorized Agent(s) will be the designated contact for all correspondence related to the above-listed steps**

SIGNATURE OF PROPERTY OWNER: \_\_\_\_\_ DATE: \_\_\_\_\_

PROPERTY OWNER NAME (PRINTED): \_\_\_\_\_

WITNESS TO SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

WITNESS NAME (PRINTED): \_\_\_\_\_