



# BOARD OF ARCHITECTURAL REVIEW

## APPLICATION / CERTIFICATE OF APPROPRIATENESS

**CITY OF CHARLESTON**  
75 Calhoun Street, Third Floor

**DEPARTMENT OF PLANNING, PRESERVATION AND ECONOMIC INNOVATION**  
Charleston, South Carolina 29401    843-724-3781    Fax : 843-724-3772    [www.charlestoncity.info](http://www.charlestoncity.info)

|                   |   |                                       |
|-------------------|---|---------------------------------------|
| Property Address: |   | TMS No.:                              |
| Review request:   | For:                                      | Meeting date requested:               |
| Conceptual        | Alterations / Additions                   | Repairs or repainting with no changes |
| Preliminary       | New Construction                          | Demolition                            |
| Final             | Signage                      Color Change | Appeal Decision of Preservation Staff |

|                              |   |
|------------------------------|---|
| Property Owner:              | Daytime phone:  |
| Applicant:                   | Daytime phone:  |
| Applicant's mailing address: |   |
| City:                        | State:                      Zip code:   |
| Applicant's e-mail address:  |   |
| Applicant's relationship:    | Owner                      Design Professional                      Contractor                      Real Estate Agent/Broker                      Other |

|   |                                |
|---|--------------------------------|
| Total heated square footage (new construction): | If multi-family, no. of units: |
|---|--------------------------------|

**In your own words describe what you are requesting:**

**Submittal Requirements:** (See [BAR Submittal Requirements](#) supplement for complete information.)

- Zoning approval obtained and/or initial TRC review completed
- Completed BAR application
- Application fee (only at initial review)
- 5 copies of photographs of site, adjacent properties, and/or existing conditions at sufficient size for review (only at initial review)
- 5 half-size sets (or 3 half-size sets if Staff Review) of bound drawings
- CD of all required information in digital format
- Contextual model if requested by Board or Preservation Officer

**INCOMPLETE APPLICATIONS WILL NOT BE INCLUDED ON A BOARD AGENDA.**

I hereby acknowledge by my signature below that the foregoing application is complete and accurate and that I am the owner of the subject property or the authorized representative of the owner. I authorize the subject property to be posted and inspected, and the application heard by the Board of Architectural Review of the City of Charleston on the meeting date specified. **I understand that it is my responsibility to obtain all necessary approvals from other city departments, and that all zoning requirements must be satisfied prior to the project's being placed on a Board of Architectural Review agenda.**

Applicant's signature: \_\_\_\_\_ date: \_\_\_\_\_

Print name legibly: \_\_\_\_\_