

Town of Sullivan's Island

Sullivan's Island, South Carolina

SPECIAL EXCEPTION AND CONDITIONAL USE PERMIT CHECK LIST

Sullivan's Island Building Department 2056 Middle Street, 29482

Phone: (843) 883-5743 Sullivan's Island South Carolina FAX: (843) 883-3009 https://sullivansisland.sc.gov

This checklist should be reviewed with the Zoning Administrator and/or Building Official and must be submitted with a Business License Application. Incomplete applications cannot be processed and will be returned to the applicant together with a checklist specifying the incomplete sections.

MINIMUM SUBMITTAL REQUIREMENTS:

Listed below are the minimum submittal requirements for any conditional use and Special Exception listed in Zoning Ordinance Section 21-50 (B) and

(C). MASTER APPLICATION a) Business license Application with Cover Sheet with Applicant Signature. b) BZA Approved Final Order c) DRB Approved Certificate of Appropriateness. d) State Issued Alcohol Beverage Licenses (if applicable) e) Restaurant Insurance Coverage, Statement for previous year by quarter SITE PLANS (fully dimensioned, two full size copies and four 11" X 17" reductions) a) Applicant name, address and phone number. b) Project site address, north arrow and drawing scale. c) Property lines. d) Floor plan illustrating the following: • Utility area (kitchens, storage, mechanical, counter service space, etc.) Patron area (seating areas, bar area, counter space) Patio and deck area (seating, patio fences, planters, etc.) e) Internal and external rights-of-way and any vehicular access or other easements. f) Existing and proposed structures with their uses labeled. g) Location of structures on adjacent properties and their uses. h) Mature trees 6 inches or more in diameter (on-site, adjacent to property lines and

- in public right-of-way).
- i) Yard dimensions.
- i) Topography (when applicable).
- k) Elevations & photographs
- Vicinity map showing ½-mile radius street system with project site highlighted

OWNERSHIP VERIFICATION (one copy)

- a) Copy of Grant Deed, Deed Trust or Title Report showing ownership.
- b) Signed Restrictive Covenant Affidavit
- c) Written Consent from property owner to authorize representative (if applicable).
- d) Lease agreement



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SUBMITTAL CHECKLIST FOR BUSINESSES ENGAGED IN ALCOHOL SALES

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This checklist is for any business engaged in the onsite consumption of alcohol. All submittals should be reviewed with the Zoning Administrator and/or Building Official and must be submitted with any new Business License request or, for any active Business License requesting an annual renewal. Incomplete applications cannot be processed and will be returned to the applicant together with a checklist specifying incomplete sections.

MINIMUM SUBMITTAL REQUIREMENTS:

Listed below are the minimum submittal requirements for any Special Exception and conditional use listed in Zoning Ordinance Section 21-50 (B) and (C).

- a) Business License Application
- b) Restaurant Insurance Coverage, Statement for previous year by quarter
- c) Findings for a Special Exception Use Permit for Food and Alcohol Sales (Sec. 21-50. (C)
- Restaurants: Must confirm that all Z.O. requirements have been met from Sec. 21-50 (C) (1)
 - Sales of food and other goods constitute at least **fifty (50) percent** of total revenue, and sales of alcohol comprise no more than **fifty (50) percent** of total revenue.
 - Submit an itemized list of the following restaurant insurance (alcohol liability insurance) information or sales tax information(year-end report):
 - 1. Provide contact information for the provider of commercial insurance
 - 2. Percentage of Liquor sales (including Sunday sales)
 - 3. Percentage of Beer and Wine sales
- Coffee Shops: Note all Z.O. requirements have been met from Sec. 21-50 (C) (2)
 - Sales of food and other goods shall constitute at least **eighty-five (85) percent** of total revenue, and limit alcohol sales to beer and wine only (per SC Code of Regulations 7-200-1 and SC Code of Laws 61-4-500), which may comprise of no more than **fifteen** (15) **percent** on-site consumption of alcohol.
 - Submit an itemized list of the following restaurant insurance(alcohol liability insurance) information or sales tax information (year-end report):
 - 1. Provide contact information for the provider of commercial insurance
 - 2. Percentage of Beer and Wine sales

NAME OF APPLICANT / AGENT	DATE	
NAME OF PROPERTY OWNER	DATE	
STAFF APPROVAL	DATE	