



Town of Hilton Head Island
 Community Development Department
 One Town Center Court
 Hilton Head Island, SC 29928
 Phone: 843-341-4757 Fax: 843-842-8908
www.hiltonheadislandsc.gov

FOR OFFICIAL USE ONLY	
Date Received:	_____
Accepted by:	_____
App. #:	_____

Applicant/Agent Name: _____ Company: _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____
 Telephone: _____ Fax: _____ E-mail: _____
 Project Name: _____ Project Address: _____
 Parcel Number [PIN]: R _____
 Zoning District: _____ Overlay District(s): _____

**UTILITY PROJECT PERMIT SUBMITTAL REQUIREMENTS –
 See LMO Appendix D-25**

The following items must be attached in order for this application to be complete:

- _____ A written narrative describing the scope of the project
- _____ A site plan with the proposed improvements. The survey must be drawn to a scale divisible by 10 (e.g. 1 inch = 30 feet) and must show the entire area of proposed disturbance plus 15 feet surrounding it.

Note: Further documentation may be required upon review of the application.

Are there recorded private covenants and/or restrictions that are contrary to, conflict with, or prohibit the proposed request? If yes, a copy of the private covenants and/or restrictions must be submitted with this application. YES NO

To the best of my knowledge, the information on this application and all additional documentation is true, factual, and complete. I hereby agree to abide by all conditions of any approvals granted by the Town of Hilton Head Island. I understand that such conditions shall apply to the subject property only and are a right or obligation transferable by sale.

I further understand that in the event of a State of Emergency due to a Disaster, the review and approval times set forth in the Land Management Ordinance may be suspended.

 SIGNATURE

 DATE