



**TOWN OF BLUFFTON
SIGN PERMIT APPLICATION**

Growth Management Customer Service Center
20 Bridge Street
Bluffton, SC 29910
(843)706-4522
www.townofbluffton.sc.gov
applicationfeedback@townofbluffton.com

Applicant		Property Owner	
Name:		Name:	
Phone:		Phone:	
Mailing Address:		Mailing Address:	
E-mail:		E-mail:	
Town Business License # (if applicable):			
Project Information			
Project Name:			
Project Location:			
Zoning District:			<input type="checkbox"/> Temporary Sign
Tax Map Number(s):			
Project Description:			
Minimum Requirements for Submittal			
<input type="checkbox"/> 1. Two (2) drawings or photographs of the proposed sign showing all elevations, dimensions, materials, and colors, including any existing signs on the building or property.			
<input type="checkbox"/> 2. For free-standing signs, one (1) drawing showing the property lines, proposed sign, dimensions, setbacks, required landscaping, and lighting.			
<input type="checkbox"/> 3. For building mounted signs, one (1) drawing or photograph of the sign on the building façade, showing the entire wall or tenant space façade, the sign location, dimensions, and existing signage.			
<input type="checkbox"/> 4. Letter of approval from ARB and/or POA, if applicable.			
<input type="checkbox"/> 5. Project Narrative describing reason for application and compliance with the criteria in Article 3 of the UDO.			
<input type="checkbox"/> 6. An Application Review Fee as determined by the Town of Bluffton Master Fee Schedule. Checks made payable to the Town of Bluffton.			
Disclaimer: The Town of Bluffton assumes no legal or financial liability to the applicant or any third party whatsoever by approving the plans associated with this permit.			
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. As applicable, I authorize the subject property to be posted and inspected.			
Property Owner Signature:			Date:
Applicant Signature:			Date:
For Office Use			
<i>Application Number:</i>			<i>Date Received:</i>
<i>Received By:</i>			<i>Date Approved:</i>



TOWN OF BLUFFTON SIGN PERMIT APPLICATION PROCESS NARRATIVE

The following Process Narrative is intended to provide Applicants with an understanding of the respective application process, procedures and Unified Development Ordinance (UDO) requirements for obtaining application approval in the Town of Bluffton. While intended to explain the process, it is not intended to repeal, eliminate or otherwise limit any requirements, regulations or provisions of the Town of Bluffton's Unified Development Ordinance. Compliance with these procedures will minimize delays and assure expeditious application review.

Step 1. Application Submittal	Applicant
The Applicant shall submit the Sign Permit Application and required submittal materials.	
Step 2. Review by UDO Administrator	Staff
If the UDO Administrator determines that the Sign Permit Application is complete, it shall be reviewed for compliance with the criteria and provisions in the UDO. The UDO Administrator may approve, approve with conditions, or deny the application.	
Step 3. Issue Sign Permit	Staff
If the Sign Permit Application is in compliance with the criteria and provision in the UDO, the UDO Administrator shall issue the Sign Permit.	