



**Town of Surfside Beach Board of Zoning Appeals  
Application for Variance and/or Appeal of Administrative  
Official Decision Regarding the Removal of Tree(s)**

843-913-6341(Phone) 843-839-0057(Fax)

**OFFICE USE ONLY**

Application #: \_\_\_\_\_  
Date Filed: \_\_\_\_\_  
Appeal No.: \_\_\_\_\_  
Meeting Date: \_\_\_\_\_

**Instructions** – Submit this application, along with the required information to the Planning, Building & Zoning Department at 829 Pine Drive, Surfside Beach, SC 29575. Applications are due at least 30 days prior to the meeting date and must be complete with all required information before the request will be placed on the agenda. There is no fee for a tree removal variance/appeal request.

**THE APPLICANT HEREBY REQUESTS:**

- A Variance as indicated on page 2 of this application (complete pages 1 & 2 only)
- An Appeal of a decision of the administrative official as indicated on page 4 of this application (complete pages 1 & 3 only)

Property Address \_\_\_\_\_ TMP# \_\_\_\_\_

Property Owner \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Applicant \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Applicant's Mailing Address \_\_\_\_\_

\_\_\_\_\_ E-Mail Address \_\_\_\_\_

Relationship of applicant to owner (same, representative, prospective buyer, other) \_\_\_\_\_

Zoning of Property \_\_\_\_\_  Commercial  Residential  Planned Development

**Information required with application: (Check information submitted)**

- Survey (to scale) of the property showing all structures, proposed improvements and or structures and location, size and specimen of all tree(s).
- Completed application with all information to be presented to the board for consideration. (Include pictures)

**DESIGNATION OF AGENT** [Complete only if owner is not applicant]:

I (we) hereby appoint the person named as Applicant as my (our) agent to represent me (us) in this application.

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owners Signature

**OWNER APPLICANT:** I hereby certify that the information on this application and any attachments is correct and that I am the owner of the subject property or the authorized agent of the owner. I authorize the subject property to be posted with a notice of the board hearing and further grant town staff and board members permission to enter the property to inspect the tree(s) in which I am requesting the variance or appeal.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owners / Authorized Agent Signature

**VARIANCE REQUEST FORM**

1. Applicant hereby appeals to the Board of Zoning Appeals for a variance from the strict application of the ordinances applicable to the property described on page 1 of this document of the following provisions of the Landscape and Tree Ordinance:

\_\_\_\_\_

\_\_\_\_\_

so that a zoning permit may be issued to allow use of the property in a manner shown on the attached scaled plan or plat, described as follows: \_\_\_\_\_

\_\_\_\_\_

For which a permit has been denied by the Planning, Building & Zoning Director, or designee on the grounds that the proposal would be in violation of the cited section(s) of the Landscape and Tree Ordinance.

2. Criteria the board shall consider in determining whether removal of the landmark/protected tree is warranted shall be described below. All criteria that apply to your request must be explained in detail and include pictures. Additional pages may be added if needed:

- a. Size, and health of the tree:  
\_\_\_\_\_
- b. Constraints for reasonable development of the site including location of primary structure and vehicle use areas, proposed grade changes, surface water drainage and utility installations:  
\_\_\_\_\_
- c. Whether a hazard is presented to pedestrians or vehicle traffic:  
\_\_\_\_\_
- d. Overall tree coverage and landscaping of the site (is it probable the trees roots will cause damage to the primary structure in time):  
\_\_\_\_\_
- e. Whether a hazard is presented to buildings or utility lines:  
\_\_\_\_\_
- f. Whether a tree is damaged, diseased, dying or dead.  
\_\_\_\_\_

3. The following documents are submitted and attached in support of this application:
- \_\_\_\_\_
- \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant/Owner

\_\_\_\_\_  
Date

**APPEAL OF A DECISION OF THE ADMINISTRATIVE OFFICIAL FORM**

This form is to be used to appeal a decision of the Administrative Official which the appellant believes to be contrary to the meaning of the Zoning Ordinance, specifically Article VII Landscaping and Tree Protection.

It is the power of the Board of Zoning Appeals to hear and decide appeals where it is alleged there is error in an order, requirement, decision, or determination made by an administrative official in the enforcement of the Zoning Ordinance.

**Explain Appeal:**

Decision of the Zoning Administrator in which you are appealing (Include Section of Zoning Ordinance):

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Please explain the reasons you feel the decision is contrary to the meaning of the Zoning Ordinance, Article VII Landscaping and Tree Protection (Additional pages may be added if needed).

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If you are requesting multiple appeals you must file each appeal separately.

It is understood by the undersigned that while this application will be carefully reviewed and considered, the burden of proving the Administrative Official erred in an order, requirement, decision, or determination rest with the applicant.

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Signature of Applicant/Owner

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Date