



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

<p>FOR OFFICIAL USE ONLY</p> <p>Date Received: _____</p> <p>Accepted by: _____</p> <p>Associated Application Number: _____</p>

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): _____

TRAFFIC IMPACT ANALYSIS SUBMITTAL REQUIREMENTS
See LMO Appendix D-11

Digital Submissions may be accepted via e-mail by calling 843-341-4757.

Please ensure that all items listed below are attached to this application per LMO Appendix D: D-11:

_____ Site layout plan including detail of proposed access

_____ Site location map

_____ Written narrative describing proposed land use, size, tax map and parcel number(s), and projected opening date, including any interim phases.

_____ Filing Fee - \$250 cash or check made payable to the Town of Hilton Head Island

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