



APPLICATION FOR ALTERNATIVE EQUIVALENT COMPLIANCE

Contact Planning & Development:

Planning@GreenvilleSC.Gov

(864) 467-4476

APPLICANT/OWNER INFORMATION

*Indicates Required Field

	APPLICANT	PROPERTY OWNER
*Name:		
*Title:		
*Address:		
*State:		
*Zip:		
*Phone:		
*Email:		

PROPERTY INFORMATION

*STREET ADDRESS(ES) _____

*TAX MAP #(S) _____

*ZONING DISTRICT(S) _____

PROJECT INFORMATION

*TYPE OF APPLICATION:

*CHECK ALL THAT APPLY	CODE SECTION	TYPE
	SECTION 19-4	USE REGULATIONS
	SECTION 19-5	DIMENSIONAL STANDARDS AND MEASUREMENTS
	SECTION 19-6.2	LANDSCAPING, BUFFERING, AND SCREENING
	SECTION 19-6.4	EXTERIOR LIGHTING
	SECTION 19-6.5	DESIGN STANDARDS FOR NONRESIDENTIAL DEVELOPMENT

	SECTION 19-6.6	SIGN REGULATIONS
	SECTION 19-6.8	DESIGN STANDARDS FOR MULTIFAMILY RESIDENTIAL DEVELOPMENT

*ASSOCIATED PERMIT APPLICATION #(s) (put N/A if not applicable)

*DATE OF REQUIRED PRE-APPLICATION MEETING: _____

*DO YOU PLAN TO NOTIFY & MEET WITH NEIGHBORHOOD RESIDENTS: ___ Yes ___ No

*NAME OF LICENSED SC STATE ARCHITECT, LANDSCAPE ARCHITECT, OR PROFESSIONAL ENGINEER

Please provide a description of why the proposed project is unable to meet the applicable subject code requirement(s):

Please provide a description of the proposed alternative design:

Please provide how this alternative design meets or exceeds the intent of the subject code requirement(s):

PLEASE COMPLETE THIS SECTION WHEN THE DEVELOPMENT PROPOSAL INCLUDES COMMERCIAL OR MULTIFAMILY USE(S) THAT ADBUT SINGLE FAMILY-DETACHED RESIDENTIAL USE(S).

Please provide how the proposed alternative design is consistent to the stated purpose of the applicable text amendment to protect single family-detached residential uses:

Please provide how the alternative design achieves the subject standards of neighborhood compatibility and maintains the harmony and character of the established single-family residential areas that abut the proposed development:

Please provide how all of the proposed access into the development will not create a negative impact to the abutting properties or rights-of-way:

Please provide how the proposal does not negatively impact any safety features of the project, nor creates any hazardous features:

Please provide how the proposal will not create negative impacts to public services, including, but not limited to, fire and emergency services:

INSTRUCTIONS

1. All applications and fees (made payable to the City of Greenville) must be received by the planning and development office no later than 2:00 pm of the date reflected on the associated decision-making body's schedule responsible to decide the application, if applicable.

2. The staff will review the application for “sufficiency” pursuant to Section 19-2.2.6, Determination of Sufficiency and will contact the applicant and identify any deficiencies which must be corrected prior to placement of the application on the appropriate agenda. Requests for proposed commercial and multi-family development, that abut single family-detached residential use(s), shall receive final approval from the Planning Commission.
3. Design Review Board agenda.

You must attach the following required documents. The Board may request additional information at any time to fully understand the proposal. Items submitted to the Board become the property of the City and will not be returned.

Please submit the following supporting documentation:

- Approval and or review of a Federal Tax Application from the SC Department of Archive and history, if applicable.
- Value of the property prior to the rehabilitation
- Written narrative indicating how the property qualifies as historic (Sec.40-15 (C and D))
- Plans and other documents detailing the proposed rehabilitation and
- Estimated qualifying rehabilitation expenditures.

Please verify that all required information is reflected in the submittal package. Please submit one (1) electronic version of the submittal package.

4. **Please read carefully:** The applicant and property owner affirm that all information submitted with this application; including any/all supplemental information, is true and correct to the best of their knowledge and they have provided full disclosure of the relevant facts.

In addition, the applicant affirms that the applicant, or someone acting on the applicant’s behalf, has made a reasonable effort to determine whether a deed or other document places one or more restrictions on the property that preclude or impede the intended use and has found no record of such a restriction.

If the Planning Office, by separate inquiry, determines that such a restriction exists, it shall notify the applicant. If the applicant does not withdraw or modify the application in a timely manner, or act to have the restriction terminated or waived, then the planning office will indicate, in its report to the Planning Commission, that to grant the requested change would not likely result in the benefit the applicant seeks.

5. To that end, the applicant hereby affirms that the tract or parcel of land subject of the attached application **is** or **is not** (please check one) restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the requested activity.

*Signatures	
Applicant	
Date	
Property Owner/Authorized Agent	
Date	

NOTICE: It is strongly encouraged that the applicant conducts a neighborhood meeting to share information about the project proposal per Section 19-2.2.4 A neighborhood meeting is required if your application is in relation to any of the following:

- a. Map amendment (rezoning), including PD (Planned Development) and FRD (Flexible Review District);
- b. Major subdivision;
- c. Special exception for: bed and breakfast inn;

- d. Multifamily or a Certificate of Appropriateness which includes a multi-family use; or**
- e. Any application requiring a public hearing where the proposed project is commercial or multi-family in nature and abuts an existing single family detached use.**