



# Bed and Breakfast Renewal Application

## City of Charleston

Submit online or deliver original application to:  
 City of Charleston Permit Center, Zoning Desk  
 2 George St, Charleston, SC 29401

**DO NOT FAX – DO NOT EMAIL**

All questions MUST be answered legibly in blue or black ink and application must be notarized. Renewal applications will be reviewed by City staff. If there are any changes to the originally approved permit, additional information will be required and the applicant may be required to submit a new application. Review and approval may take up to three weeks. **\*Incomplete applications will be denied\***

For instructions on how to apply online and for additional information please visit [www.charleston-sc.gov/shorttermrentals](http://www.charleston-sc.gov/shorttermrentals)

Operational Permit # \_\_\_\_\_ Exp Date \_\_\_\_\_ (must be within 45 days of application)

**Bed and Breakfast Renewal Only – For Commercial and Residential STR renewals a different application is needed**

<b>APPLICANT'S CONTACT INFORMATION</b>	Name: _____ Owner of record of the property: _____ Mailing Address for applicant: _____ Email address: _____ Daytime Phone: _____ Mobile Phone: _____ Emergency Contact (other than applicant): _____ Phone number: _____
<b>PROPERTY FOR BED AND BREAKFAST USE</b>	Street Address of Property: _____ Unit/Suite/Apt: _____ Property Identification Number (PIN/TMS#): _____ Current use of building: <input type="checkbox"/> 1 or 2 family residence <input type="checkbox"/> Other Number of dwelling units on this property: _____ Number of stories: _____ Total number of bedrooms on this property: _____ Total number of rooms to be used by B&B guests for sleeping: _____ Total number of parking spaces on property: _____
<b>APPLICATION CHECKLIST:</b>	<input type="checkbox"/> <b>Bed and Breakfast Renewal Application, completed and notarized).</b> <input type="checkbox"/> <b>Copy of Accommodations Tax receipt from Charleston County.</b> <input type="checkbox"/> <b>If use was approved prior to July 10, 2018, a copy of current floor plan, site plan showing parking and the Charleston County Assessor's Short Term Rental Certificate form is required (NOTE TO APPLICANT: Use of the property for a B&amp;B as defined herein may result in the partial loss of the 4% Legal Residence exemption and a significant increase in real property taxes)</b> <input type="checkbox"/> <b>Non-refundable application fee of \$200 (does not include Fire Marshal review and inspection fee.)</b>

I hereby certify and acknowledge **by my initials and signature** below that:

- \_\_\_\_\_ This application is complete and accurate;
- \_\_\_\_\_ I have reviewed and understand the applicable Zoning Ordinance regulations for operating a B&B;
- \_\_\_\_\_ There are no changes to the approved Floor Plan and Site Plan for this address;
- \_\_\_\_\_ I am the owner and resident of the property where the Bed and Breakfast unit is located and I reside at the subject property at least 183 days each year;
- \_\_\_\_\_ No meals other than breakfast are served to paying guests, if meals are being served by the owner-operator;
- \_\_\_\_\_ I keep a guest register including names, addresses and dates of occupancy of all guests;
- \_\_\_\_\_ I comply with all business license and revenue collection laws of the City, County and State, including accommodations taxes to Charleston County;
- \_\_\_\_\_ The portion of the premises used for the B&B use may be inspected by City personnel on an annual basis to check for compliance with the Zoning Ordinance;
- \_\_\_\_\_ All advertisements include the last five (5) digits of my Operational Permit number. I understand that failure to comply constitutes a violation of the Zoning Ordinance and will result in the issuance of a Municipal Summons.

**Signature of B&B owner-operator** \_\_\_\_\_ **Date** \_\_\_\_\_

Sworn to me this _____ day of _____, 20____  _____ Notary Public  My Commission expires _____
--

<b>OFFICE USE ONLY</b>	date & time application received:	fee:	staff:
Results: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/ conditions <input type="checkbox"/> Disapproved    Date: _____ Conditions: _____			

Once an application and fee are received and determined to be complete, City staff will review to ensure compliance. This includes review by Zoning, Livability and Tourism and the Fire Marshal. After review is completed, applicant will receive an email with instructions on how to schedule a safety inspection with the Fire Marshal department via CAP account (Citizen Access Portal). If you do not have a CAP account please fill out the CAP Authorization Form found at <http://charleston-sc.gov/cap>. Once a successful inspection is completed, applicant will receive an updated Certificate of Operation valid for one year from the Business License department, upon verifying that Business License is up to date.

Questions? Contact [shorttermrental@charleston-sc.gov](mailto:shorttermrental@charleston-sc.gov) or 843-724-3779.