



**TOWN OF BLUFFTON  
 CERTIFICATE OF APPROPRIATENESS-  
 OLD TOWN BLUFFTON  
 HISTORIC DISTRICT (HD) APPLICATION**

Growth Management Customer Service Center  
 20 Bridge Street  
 Bluffton, SC 29910  
 (843)706-4500  
[www.townofbluffton.sc.gov](http://www.townofbluffton.sc.gov)  
[applicationfeedback@townofbluffton.com](mailto:applicationfeedback@townofbluffton.com)

Applicant		Property Owner	
Name: Amanda and Dylan Mingard		Name: Amanda and Dylan Mingard	
Phone: 808-209-5581		Phone: 808-209-5581	
Mailing Address: 41 Stock Farm Road Bluffton, SC 29910		Mailing Address: 41 Stock Farm Road Bluffton, SC 29910	
E-mail: mingards@gmail.com		E-mail: mingards@gmail.com	
Town Business License # (if applicable):			
<b>Project Information</b> (tax map info available at <a href="http://www.townofbluffton.us/map/">http://www.townofbluffton.us/map/</a> )			
Project Name: <b>Mingard Carport</b>		Conceptual: <input type="checkbox"/>	Final: <input checked="" type="checkbox"/>
Project Address: 41 Stock Farm Road Bluffton, SC 29910		Amendment: <input type="checkbox"/>	
Zoning District: Neighborhood Conservation Historic		Application for:	
Acreage: <b>.6</b>		<input checked="" type="checkbox"/> New Construction	
Tax Map Number(s): R610 039 000 0193 0000		<input checked="" type="checkbox"/> Renovation/Rehabilitation/Addition	
		<input type="checkbox"/> Relocation	
Project Description: Addition of a carport, storage area and breezeway			
<b>Minimum Requirements for Submittal</b>			
<input checked="" type="checkbox"/> 1. Mandatory Check In Meeting to administratively review all items required for conceptual submittal must take place prior to formal submittal. <input checked="" type="checkbox"/> 2. Digital files drawn to scale of the Site Plan(s). <input checked="" type="checkbox"/> 3. Digital files of the Architectural Plan(s). <input checked="" type="checkbox"/> 4. Project Narrative describing reason for application and compliance with the criteria in Article 3 of the UDO. <input checked="" type="checkbox"/> 5. All information required on the attached Application Checklist. <input checked="" 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.			
<b>Note:</b> A Pre-Application Meeting is required prior to Application submittal.			
<b>Disclaimer:</b> 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: 5/5/2025	
Applicant Signature:		Date: 5/5/2025	
<i>For Office Use</i>			
Application Number:		Date Received:	
Received By:		Date Approved:	



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**HISTORIC DISTRICT (HD) 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 UDO. The Town of Bluffton's Mission and Vision Statements help navigate staff to ensure that the goals outlined by Town Council are being met. As each project is being reviewed, Town staff will use the Mission Statement, Vision Statement, The Covenant for Bluffton and the current Strategic Plan to guide their review. Compliance with these procedures will minimize delays and as sure expeditious application review.

<b>Step 1. Pre-Application Meeting</b>	<b>Applicant &amp; Staff</b>
Prior to the filing of a Certificate of Appropriateness - HD Application, the Applicant is required to consult with the UDO Administrator or designee at a Pre-Application Meeting for comments and advice on the appropriate application process and the required procedures, specifications, and applicable standards required by the UDO.	
<b>Step 2. Application Check-In Meeting – Concept Review Submission</b>	<b>Applicant &amp; Staff</b>
Upon receiving input from Staff at the Pre-Application Meeting, the Applicant may submit a Concept Review Submission of the Certificate of Appropriateness - HD Application with the required submittal materials during an <b>mandatory</b> Application Check-In Meeting where the UDO Administrator or designee will review the submission for completeness. Call 843-706-4500 to schedule.	
<b>Step 3. Review by UDO Administrator or designee and HPRC</b>	<b>Staff</b>
If the UDO Administrator or designee, determines that the Concept Review Submission of the Certificate of Appropriateness - HD Application is complete, it shall be forwarded to the Historic Preservation Review Committee. The Review Committee shall review the application and prepare written comment for review with the Applicant.	
<b>Step 4. Historic Preservation Review Committee</b>	<b>Applicant, Staff &amp; Historic Preservation Review Committee</b>
A public meeting shall be held with the Applicant to review Committee's Staff Report and discuss the application. The Review Committee shall review the Concept Review Submission for compliance with the criteria and provisions in the UDO. The Applicant will be given the opportunity to address comments, if any, and resubmit the application materials to proceed to the Final Review Submission.	
<b>Step 5. Application Check-In Meeting - Final Review Submission</b>	<b>Applicant &amp; Staff</b>
The Applicant shall submit the completed Final Review Submission of the Certificate of Appropriateness Application with the required submittal materials during a mandatory Application Check-In Meeting where the UDO Administrator or designee will review the submission for completeness.	
<b>Step 6. Historic Preservation Commission Meeting</b>	<b>Applicant, Staff &amp; Historic Preservation Commission</b>
A public meeting shall be held with the Applicant where the HPC shall review the Final Application materials of the Certificate of Appropriateness - HD Application for compliance with the criteria and provisions in the UDO. The HPC may approve, approve with conditions, or deny the application.	
<b>Step 7. Issue Certificate of Appropriateness</b>	<b>Staff</b>
If the HPC approves the Certificate of Appropriateness - HD Application, the UDO Administrator or designee shall issue the Certificate of Appropriateness - HD.	



**TOWN OF BLUFFTON**  
**CERTIFICATE OF APPROPRIATENESS – OLD TOWN BLUFFTON**  
**HISTORIC DISTRICT (HD) PROJECT ANALYSIS**

In accordance with the Town of Bluffton Unified Development Ordinance (UDO), the following information shall be included as part of a Certificate of Appropriateness application submitted for review by the Historic Preservation Commission (HPC) and the Historic Preservation Review Committee. The use of this checklist by Town Staff or the Applicant shall not constitute a waiver of any requirement contained in the UDO.

<b>1. DESIGN REVIEW PHASE</b>		CONCEPTUAL REVIEW <input type="checkbox"/>	FINAL REVIEW <input checked="" type="checkbox"/>
<b>2. SITE DATA</b>			
Identification of Proposed Building Type (as defined in Article 5): <b>Carriage House</b>			
Building Setbacks	Front:n/a	Rear:5	Rt. Side:5 Lt. Side:5
<b>3. BUILDING DATA</b>			
Building	Description (Main House, Garage, Carriage House, etc.)	Existing Square Footage	Proposed Square Footage
Main Structure			
Ancillary	Carport and breezeway	0	1091
Ancillary			
<b>4. SITE COVERAGE</b>			
<b>Impervious Coverage</b>		<b>Coverage (SF)</b>	
Building Footprint(s)		264	
Impervious Drive, Walks & Paths		No additional	
Open/Covered Patios		827	
<b>A. TOTAL IMPERVIOUS COVERAGE</b>		1091	
<b>B. TOTAL SF OF LOT</b>		261360	
<b>% COVERAGE OF LOT (A/B= %)</b>		4	
<b>5. BUILDING MATERIALS</b>			
Building Element	Materials, Dimensions, and Operation	Building Element	Materials, Dimensions, and Operation
Foundation	Cement	Columns	Wood
Walls	Wood Framing	Windows	Aluminum
Roof	Asphalt Shingles	Doors	Wood
Chimney	N/A	Shutters	N/A
Trim	Wood	Skirting/Underpinning	CMU Walls
Water table	Hardy Bandboard/Copper flashing	Cornice, Soffit, Frieze	Hardy
Corner board	Hardy Trim	Gutters	Aluminum Half Round
Railings	N/A	Garage Doors	N/A
Balusters	N/A	Green/Recycled Materials	<b>N/A</b>
Handrails	N/A		



## TOWN OF BLUFFTON

### CERTIFICATE OF APPROPRIATENESS – OLD TOWN BLUFFTON HISTORIC DISTRICT (HD) APPLICATION CHECKLIST

**Note:** Certificate of Appropriateness application information will vary depending on the activities proposed. At a minimum, the following items (signified by a grayed checkbox) are required, as applicable to the proposed project.

Concept	Final	BACKGROUND INFORMATION.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>COMPLETED CERTIFICATE OF APPROPRIATENESS - HD APPLICATION:</b> A completed and signed application providing general project and contact information.
<input type="checkbox"/>	<input type="checkbox"/>	<b>PROPERTY OWNER CONSENT:</b> If the applicant is not the property owner, a letter of agency from the property owner is required to authorize the applicant to act on behalf of the property owner.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>PROJECT NARRATIVE:</b> A detailed narrative describing the existing site conditions and use, the proposed development intent with proposed uses and activities that will be conducted on the site. Include a description of the proposed building type and proposed building materials as permitted in Article 5.
<input type="checkbox"/>	<input type="checkbox"/>	<b>DEED COVENANTS/RESTRICTIONS:</b> A copy of any existing deed covenants, conditions and restrictions, including any design or architectural standards that apply to the site.
<input type="checkbox"/>	<input type="checkbox"/>	<b>ADDITIONAL APPROVALS:</b> A written statement from the Declarant of any deed covenants, conditions, or restrictions and/or the Review Body of any design or architectural standards that the current design has been reviewed for consistency with the established restrictions/design principles and approved.
Concept	Final	SITE ASSESSMENT.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>LOCATION MAP:</b> Indicating the location of the lot and/or building within the Old Town Bluffton Historic District with a vicinity map.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>PROPERTY SURVEY:</b> Prepared and sealed by a Registered Land Surveyor indicating the following, but not limited to: <ul style="list-style-type: none"> <li>• All property boundaries, acreage, location of property markers, name of county, municipality, project location, and parcel identification number(s);</li> <li>• Municipal limits or county lines, zoning, overlay or special district boundaries, if they traverse the tract, form a part of the boundary of the tract, or are contiguous to such boundary;</li> <li>• All easements of record, existing utilities, other legal encumbrances, public and private rights-of-way, recorded roadways, alleys, reservations, and railways;</li> <li>• Existing watercourses, drainage structures, ditches, one-hundred (100) year flood elevation, OCRM critical line, wetlands or riparian corridors top of bank locations, and protected lands on or adjacent to the property;</li> <li>• Location of existing buildings, structures, parking lots, impervious areas, public and private infrastructure, or other man-made objects located on the development property; and</li> <li>• North arrow, graphic scale, and legend identifying all symbology.</li> </ul>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>SITE PLAN:</b> Showing layout and design indicating, but not limited to: <ul style="list-style-type: none"> <li>• All property survey information showing all building footprint(s) with finish floor elevations, setbacks and build-to lines, building location(s), building orientation(s);</li> <li>• Overall lot configuration depicting ingress/egress, circulation, driveways, parking areas, patios, decks, pools, hardscape, service yards and all other site amenities;</li> <li>• Pedestrian circulation elements and ensuring design shows ADA accessibility compliance. Location, layout, and number of vehicular and bicycle parking spaces bicycle parking, and ensuring design shows ADA accessibility compliance; and</li> <li>• Include detailed dimensions as necessary and appropriate to demonstrate compliance with all applicable standards and requirements.</li> </ul>

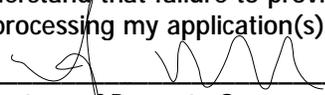


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<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>PHOTOS:</b> Labeled comprehensive color photograph documentation of the property, all exterior facades, and the features impacted by the proposed work. If digital, images should be at a minimum of 300 dpi resolution.
<b>Concept</b>	<b>Final</b>	<b>ARCHITECTURAL INFORMATION.</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>CONCEPTUAL ARCHITECTURAL SKETCHES:</b> Sketch of plans, elevations, details, renderings, and/or additional product information to relay design intent.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>FLOOR/ROOF PLANS:</b> Illustrate the roof and floor plan configurations. Include all proposed uses, walls, door & window locations, overall dimensions and square footage(s).
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>ELEVATIONS:</b> Provide scaled and dimensioned drawings to illustrate the exterior appearance of all sides of the building(s). Describe all exterior materials and finishes and include all building height(s) and heights of appurtenance(s) as they relates to adjacent grade, first floor finished floor elevations, floor to ceiling height for all stories, existing and finish grades for each elevation.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>ARCHITECTURAL DETAILS:</b> Provide scaled and dimensioned drawings to show the configuration and operation of all doors, windows, shutters as well as the configuration and dimensional information for columns and porch posts, corner boards, water tables, cupolas and roof appurtenances, gutters and downspouts, awnings, marquees, balconies, colonnades, arcades, stairs, porches, stoops and railings.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>MANUFACTURER'S CUT SHEET/SPECIFICATIONS:</b> Include for all atypical building elements and materials not expressly permitted by Article 5 of the UDO with sizes and finishes noted.
<b>Concept</b>	<b>Final</b>	<b>LANDSCAPE INFORMATION.</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>TREE REMOVAL PLAN:</b> A site plan indicating location, species, and caliper of existing trees and trees to be removed.
<input type="checkbox"/>	<input type="checkbox"/>	<b>LANDSCAPE PLAN:</b> Plan must include proposed plant materials including names, quantities, sizes and location, trees to be removed/preserved/relocated, areas of planting, water features, extent of lawns, and areas to be vegetated. Plant key and list to be shown on the landscape plan as well as existing and proposed canopy coverage calculations.
<b>Concept</b>	<b>Final</b>	<b>ADDITIONAL REQUIRED INFORMATION (Single-Family Residential Excluded).</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>FINAL DEVELOPMENT PLAN APPLICATION:</b> A Final Development Plan Application, along with all required submittal items as depicted on the application checklist, must be submitted prior to a Final Certificate of Appropriateness submittal and approved prior to the application being heard by the Historic Preservation Commission.

**SIGN AND RETURN THIS CHECKLIST WITH THE APPLICATION SUBMITTAL**

By signature below I certify that I have reviewed and provided the submittal items listed above. Further, I understand that failure to provide a complete, quality application or erroneous information may result in the delay of processing my application(s).

  
 \_\_\_\_\_  
 Signature of Property Owner or Authorized Agent

5/5/2025  
 \_\_\_\_\_  
 Date

Amanda Mingard  
 \_\_\_\_\_  
 Printed Name of Property Owner or Authorized Agent

  
 \_\_\_\_\_  
 Signature of Applicant

5/5/2025  
 \_\_\_\_\_  
 Date

Amanda Mingard  
 \_\_\_\_\_  
 Printed Name of Applicant