



**TOWN OF BLUFFTON**  
**PLANNED UNIT DEVELOPMENT (PUD)**  
**MASTER PLAN APPLICATION**

Growth Management Customer Service Center  
 20 Bridge Street  
 Bluffton, SC 29910  
 (843)706-4522  
[www.townofbluffton.sc.gov](http://www.townofbluffton.sc.gov)  
[applicationfeedback@townofbluffton.com](mailto:applicationfeedback@townofbluffton.com)

Applicant		Property Owner	
Name:	Witmer Jones Keefer	Name:	Millstone Ventures LLC
Phone:	843-757-7411	Phone:	317-694-5114
Mailing Address:	23 Promenade Street	Mailing Address:	
E-mail:	Brian@wikltd.com	E-mail:	Owen@millstonemgmt.com
Town Business License # (if applicable):			
Project Information			
Project Name:	Parcel B-1	<input checked="" type="checkbox"/> New	<input type="checkbox"/> Amendment
Project Location:	HWY 170 & GIBBET RD.	Acreage:	21.922
PUD Name:	Buckwalter		
Tax Map Number(s):	R610 028 000 0921 0000		
Project Description:	Multi family, Convenience Store, Professional, Retail uses		
Minimum Requirements for Submittal			
<input checked="" type="checkbox"/> 1. Two (2) full sized copies and digital files of the Master Plan. <input checked="" type="checkbox"/> 2. Recorded deed and plat showing proof of property ownership. <input checked="" type="checkbox"/> 3. Project Narrative describing reason for application and compliance with the criteria in Article 3 of the UDO. <input type="checkbox"/> 4. 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>	<b>A Pre-Application Meeting is required prior to Application submittal.</b>		
<b>Disclaimer:</b>	<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.</b>		
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:	Adrian D. Dammiller	Date:	6/1/23
Applicant Signature:	Brian Keefer	Date:	6/5/23
<b>For Office Use</b>			
Application Number:		Date Received:	
Received By:		Date Approved:	