HORRY COUNTY
PLANNING & ZONING DEPARTMENT
1301 SECOND AVE., SUITE 1D 09
CONWAY SC, 29526

PHONE: (843) 915-5340

FAX: (843) 915-6340

AGRITOURISM PERMIT

APPLICATION PROCEDURES

The intent of this permit is to provide farms with agritourism activities relief from certain commercial development standards that are inconsistent with the character of their operations and that of the surrounding environment. The requirements of this permit, along with definitions defining agritourism activities, can be found in Appendix B, Zoning Ordinance, Article XIII, Section 1304.2 of the Horry County Code of Ordinances.

APPLICATION SUBMISSION REQUIREMENTS

1. All Agritourism permit requests shall be submitted in person, along with a non-refundable administrative fee of twenty dollars **($20),** to the Planning & Zoning Department at 1301 2nd Avenue, Conway, SC. Incomplete applications will not be accepted.
2. Applications shall be made to the Planning Department and shall include the following:
    a. A master plan, including a site sketch, parking plan, and plan for restroom facilities.
        i. A site sketch must include the location of all proposed agritourism activities, restroom facilities, and all existing and proposed buildings, including any farm structures that may be used to support such activities. If portable toilets will be used, the applicant shall furnish a copy of the rental agreement and cleaning schedule with the application.
        ii. A parking plan shall identify the location of parking areas, number of parking spaces, and identify the ingress and egress plans for agritourism activities.
    b. An operation plan shall minimally include the rules and restrictions of the facility, along with a list of all planned events, dates, type of activity, and expected attendance.
3. Upon permit application submission or any required resubmissions, Planning & Zoning staff shall have 15 days to review the Agritourism Permit Application.
4. Upon Planning & Zoning Staff review and recommendation, the Board of Architectural Review (BAR) shall consider the approval of the Agritourism Permit at an advertised public meeting. In cases where the BAR deems it necessary, it may hold a public hearing concerning the application. Said hearing shall be advertised in a newspaper of general County circulation fifteen days (15) prior to the scheduled hearing. Surrounding property owners within a five hundred (500) foot radius shall be notified as well.
5. The Board may attach conditions to the permit regarding the location, character, or other features of the proposed uses as they deem advisable to protect established property values in the surrounding area or to promote the public health, safety or general welfare.
6. Upon BAR approval, the permit shall be valid for five (5) years from date of issuance. Any changes in activities and events must be approved by the BAR. The Zoning Administrator, or his/her designee, may review the property every 30 days to ensure compliance with the permit.

ENERGOV#_____
CASE# _____
SUB DATE_____
STAFF _____

AGRITOURISM PERMIT APPLICATION

PROPERTY INFORMATION:

_____ _____
FARM NAME/BUSINESS NAME USDA FARM NUMBER (REQUIRED TO APPLY)

_____ _____
PROPERTY LOCATION BUSINESS LICENSE NUMBER (IF APPLICABLE)

Provide information on all properties associated with this request:

1) _____
PIN NUMBER ZONING DISTRICT ACRES

2) _____
PIN NUMBER ZONING DISTRICT ACRES

3) _____
PIN NUMBER ZONING DISTRICT ACRES

Check all that apply to the farm listed above (at least one required to apply):

- ☐ NATIONAL HISTORIC REGISTRY
- ☐ HORRY COUNTY HISTORIC REGISTER
- ☐ SC CENTURY FARM
- ☐ AGRICULTURAL PROPERTY ASSESSMENT
- ☐ $1,000 OR GREATER IN ANNUAL AGRICULTURAL SALES

PROPERTY OWNER(S) INFORMATION:

Provide a complete list of owners. If property owner is a partnership or corporation or each property on this application has different owners, provide the names, addresses and telephone numbers of all parties involved. Please attach another sheet if necessary.

1) _____ _____
NAME TELEPHONE

_____ _____
ADDRESS STATE ZIPCODE EMAIL ADDRESS

2) _____ _____
NAME TELEPHONE

_____ _____
ADDRESS STATE ZIPCODE EMAIL ADDRESS

3) _____ _____
NAME TELEPHONE

_____ _____
ADDRESS STATE ZIPCODE EMAIL ADDRESS

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AGRITOURISM PERMIT APPLICATION

OPERATIONS PLAN:

Check all planned activities below. Shaded areas indicate allowed uses by farm size. Asterisks indicate all uses that may be deemed allowable for more than 121 days/year. For all uses indicated below, please provide a list of dates, days and hours of operation on the following page and identify their locations on a sketch plan.

USES/ACTIVITES	CLASS A: HOME OPERATION (<3 ACRES)	CLASS B: MARKET OPERATION (3-<5 ACRES)	CLASS C: FAMILY FARM (5 - <10 ACRES)	CLASS D: SMALL FARM (10 - <20 ACRES)	CLASS E: MEDIUM FARM (20 - <40 ACRES)	CLASS F: LARGE FARM (40 - <80 ACRES)	CLASS G: (80+ ACRES)
AGRICULTURE RELATED ACTIVITIES							
Agriculture Education Center*			☐	☐	☐	☐	☐
Barn Dance*		☐	☐	☐	☐	☐	☐
Corn Maze			☐	☐	☐	☐	☐
Educational Classes*	☐	☐	☐	☐	☐	☐	☐
Farm Museum*				☐	☐	☐	☐
Farm Tour			☐	☐	☐	☐	☐
Farm-to-Table Event		☐	☐	☐	☐	☐	☐
Fee Fishing	☐	☐	☐	☐	☐	☐	☐
Harvest-Market*			☐	☐	☐	☐	☐
Hay Ride			☐	☐	☐	☐	☐
Nursery	☐	☐	☐	☐	☐	☐	☐
Petting Farm/Zoo			☐	☐	☐	☐	☐
Rent-a-Row	☐	☐	☐	☐	☐	☐	☐
You Pick Operation/Berry/Pumpkin Patch		☐	☐	☐	☐	☐	☐
NON-AGRICULTURE RELATED USES/ACTIVITIES							
Food Service, including Food Trucks Featuring Farm Products*	☐	☐	☐	☐	☐	☐	☐
Haunted House*	☐	☐	☐	☐	☐	☐	☐
Agritourism Retail		☐	☐	☐	☐	☐	☐
Planned/Guided Hunting Preserve Tours							☐
Play Area	☐	☐	☐	☐	☐	☐	☐
Special Events, including Weddings*	☐	☐	☐	☐	☐	☐	☐
Value Added Product Processing*			☐	☐	☐	☐	☐
Wine Tastings*	☐	☐	☐	☐	☐	☐	☐
FARM STAY (RESIDENTIAL AND OVERNIGHT ACCOMODATION) USES/ACTIVITIES							
Camping		☐	☐	☐	☐	☐	☐
Farm Stay		☐	☐	☐	☐	☐	☐
Health Farm*				☐	☐	☐	☐
RURAL TOURISM ACTIVITIES ARE NOT COVERED UNDER THIS PERMIT							
Rural Tourism	Tourism enterprises that do not necessarily occur on a farm or ranch or at an agricultural plant, are not related to agricultural activities, but provide recreation to the general public. Rural tourism does not generate supplemental income for an agricultural enterprise but provides an additional income for the property owner.						
Rural Tourism Activities	Activities that are not agriculturally related nor support an agricultural operation.						

AGRITOURISM PERMIT APPLICATION

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EVENT INFORMATION:

Provide a complete list of all planned activities. Provide additional pages if necessary.

1) _____ _____
EVENT DATES OF OPERATION

_____ _____
PLANNED ACTIVITIES TOTAL NUMBER OF DAYS (ANNUALLY)

_____ _____
PLANNED ACTIVITIES ANTICIPATED DAILY VISITORS

2) _____ _____
EVENT DATES OF OPERATION

_____ _____
PLANNED ACTIVITIES TOTAL NUMBER OF DAYS (ANNUALLY)

_____ _____
PLANNED ACTIVITIES ANTICIPATED DAILY VISITORS

3) _____ _____
EVENT DATES OF OPERATION

_____ _____
PLANNED ACTIVITIES TOTAL NUMBER OF DAYS (ANNUALLY)

_____ _____
PLANNED ACTIVITIES ANTICIPATED DAILY VISITORS

Check all that apply:

- ☐ ALCOHOLIC BEVERAGES WILL BE SERVED AT ANY OF THESE EVENTS.
- ☐ VENDORS OR FOOD TRUCKS WILL BE ON SITE DURING ANY OF THESE EVENTS.
- ☐ PORTABLE TOILETS WILL BE USED DURING ANY OF THESE EVENTS.
- ☐ A COURTESY FARM BUILDING INSPECTION IS REQUESTED TO EVALUATE THE CONDITION OF FARM STRUCTURES FOR PUBLIC ASSEMBLY. INDICATE HOW MANY FARM BUILDINGS ARE INTENDED FOR PUBLIC ASSEMBLY: _____
- ☐ APPLICANT ACKNOWLEDGES THAT ANY EVENT WITH MORE THAN 500 PEOPLE AT ONE TIME WILL REQUIRE A SPECIAL EVENT PERMIT FROM HORRY COUNTY PUBLIC SAFETY.

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AGRITOURISM PERMIT APPLICATION

SIGNATURE PAGE

I hereby acknowledge by signature below that all information provided in this application is correct and that all proposed agritourism activities meet the requirements as listed above and fully explained in Appendix B, Zoning Ordinance, Article XIII, Section 1304.2 of the Horry County Code of Ordinances. I understand that the County may revoke any approved permits if there is failure to adhere to the approved site plan, approved event schedule or activities, or failure to adhere to any County, State, and Federal laws.

PROPERTY OWNER(S) SIGNATURE

_____ _____

PRINT SIGNATURE DATE

_____ _____

PRINT SIGNATURE DATE

_____ _____

PRINT SIGNATURE DATE

Corporation/Partnership (if applicable)

_____

PRINT CORPORATION/PARTNERSHIP NAME (IF LLC OR CORP, PLEASE PROVIDE AUTHORIZATION TO SIGN)

_____ _____

BY PRINT NAME SIGNATURE DATE

DESIGNATION OF AGENT (if applicable):

I hereby appoint the person listed below as agent to act on my behalf for the purpose of filing such application for an Agritourism Permit as he/she shall deem necessary and proper.

_____ _____

AGENTS NAME TELEPHONE

_____ _____

ADDRESS STATE ZIPCODE EMAIL ADDRESS

_____ _____

SIGNATURE OF AGENT **DATE**

_____ _____

SIGNATURE OF OWNER(S) **DATE**

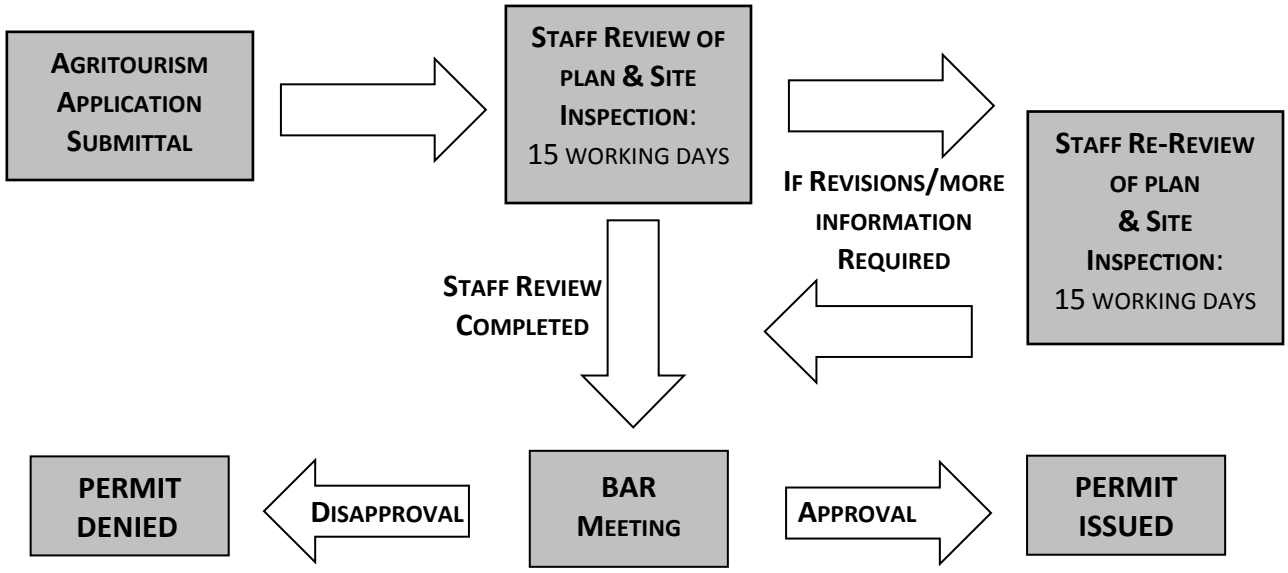
_____ _____

SIGNATURE OF OWNER(S) **DATE**

_____ _____

SIGNATURE OF WITNESS **DATE**

AGRITOURISM 2016 / 2017 SUBMITTAL DEADLINES AND MEETING SCHEDULE

SUBMITTALS	BAR MEETING* (2:30 pm in Meeting Room B)
AUGUST 18, 2016	SEPTEMBER 20, 2016
SEPTEMBER 15, 2016	OCTOBER 18, 2016
OCTOBER 13, 2016	NOVEMBER 15, 2016
DECEMBER 15, 2016	JANUARY 17, 2017
JANUARY 19, 2017	FEBRUARY 21, 2017
FEBRUARY 16, 2017	MARCH 21, 2017
MARCH 16, 2017	APRIL 18, 2017
APRIL 13, 2017	MAY 16, 2017
MAY 18, 2017	JUNE 20, 2017
JULY 13, 2017	AUGUST 15, 2017
AUGUST 17, 2017	SEPTEMBER 19, 2017
SEPTEMBER 14, 2017	OCTOBER 17, 2017
OCTOBER 19, 2017	NOVEMBER 21, 2017

***Meeting date dependent on level of detail provided with application. If more information / revisions are needed, meeting date could be deferred until a later date.**