



Town of Seabrook Island
 2001 Seabrook Island Road
 Seabrook Island, SC 29455

townofseabrookisland.org

**Short-Term Rental Permit
 Application (Modification)**

**STR FORM
 M-4**

Contact Us: (843) 768-9121

brinehimer@townofseabrookisland.org

**Change of Overnight Occupancy/Vehicle Limit
 Supplement**

TO BE COMPLETED BY APPLICANT	
Property Address	
Owner Name(s)	
STR Permit Number	

Pursuant to Section 9.4 O(3)(e)(i)(e) of the Development Standards Ordinance (DSO), I (we) hereby request a modification of the overnight occupancy/vehicle limit associated with the above-referenced Short-Term Rental Permit due to the following:

Addition to the number of code compliant bedrooms from ___ bedrooms to ___ bedrooms

Building Permit Number: _____

Date of Final Inspection/Certificate of Occupancy: _____

Reduction to the number of code compliant bedrooms from ___ bedrooms to ___ bedrooms

Building Permit Number: _____

Date of Final Inspection/Certificate of Occupancy: _____

Correction to the number of code compliant bedrooms shown on current Charleston County tax records from ___ bedrooms to ___ bedrooms

▶ ATTACH VERIFICATION OF CORRECTION FROM CHARLESTON COUNTY BUILDING DEPT.

Owner Signature: _____

Owner Signature: _____

Printed Name: _____

Printed Name: _____

Date: _____

Date: _____