



# COUNTY OF LEXINGTON

## COMMUNITY DEVELOPMENT DEPARTMENT

212 South Lake Drive, Ste. 401, Lexington SC 29072 Phone: (803)785-8121 Fax: (803)785-5186

### Short-Term Rental Permit Application Packet

#### PURPOSE

The purpose of the regulations regarding Short-Term Rentals, is to protect the quality of life, character of neighborhoods, and water quality of the County's various watersheds. This Article sets out standards for establishing and operating short-term rentals within the unincorporated jurisdiction of Lexington County. These regulations are intended to provide for an efficient use of dwellings as a short-term rental by:

1. Providing a permitting and inspection process to regulate short-term rentals.
2. Balancing the interest of properties that are frequently used in whole or in part by a short-term rental.
3. Allowing homeowners to continue to utilize their residences in the manner permitted by this Ordinance.
4. Providing alternative accommodation options for lodging in a residential unit.
5. Complementing the accommodation options in environments that are desirable and suitable as a means of growing tourism.

#### WHEN TO USE THIS PROCESS

The Lexington County Zoning Ordinance defines short-term rentals as the rental of a property for a period between one (1) and twenty-nine (29) consecutive days whereby the property is utilized as one of the following:

- A. Owner Occupied: The record owner of a property, who is also a resident of the property and has a legal residence classification, uses one or more rooms on the property for the purpose of providing sleeping accommodations.
- B. Non-Owner Occupied: The record owner of the property, who does not live on the property and does not have a legal residence classification, converts a dwelling unit into a fully functioning, private accommodations use, which includes cooking, living, sanitary, and sleeping facility within one dwelling unit.

If your rental activity falls within the above occupancy and length of stay guidelines noted above, a short-term rental permit is required.

\*PLEASE NOTE: Any modifications to the residence that were not approved by the Lexington County Building Department and were performed without the issuance of proper permits will disqualify the residence for a Short Term Rental land use. Also, any modifications performed without a building permit may be subject to reversal of work done. Any unpermitted modifications done to a structure are considered to render the building unsafe and is subject to removal of electrical service until brought into compliance.

#### APPLICATION PROCESS

Submit the attached permit application, along with the required documents set forth below to our customer service email address at: [cdcustomerservice@lexingtoncounty.sc.gov](mailto:cdcustomerservice@lexingtoncounty.sc.gov), or by mail or in person to Lexington County Community Development 212 S. Lake Drive, Suite 401, Lexington, SC 29072. PLEASE NOTE: Applications received without the required documents will be returned as an "incomplete

submittal". Failure to properly submit a completed application and the required documents can result in enforcement by the Lexington County Sheriff's Department.

1. Submit the attached application and all associated documents in PDF format. Your application must include:
  - a. Site Plan of the property with a Parking Plan;
  - b. Floor Plan indicating the locations of all rooms and bedrooms within the property; and
  - c. Proof of inspection by a Good Operating Condition Report (GOCR\*) by a SCDHEC licensed inspector. (\*The inspection must take place within 30 days of application and requires a pump-out of the septic tank to ensure a property inspection of the interior of the tank.)
2. You will be asked to affirm whether your Short Term Rental land use adheres to Life Safety Requirements. This acknowledgment affirms that the applicant will be solely responsible for any Life Safety measures within the Short Term Rental and that the County of Lexington will not be held liable if those measures are not met.
3. Zoning staff will review your application and send comments back to the designated contact person on the application within approximately 20 business days.
4. If the Short-Term Rental application is approved, a notice of approval will be emailed to the applicant with payment instructions.
5. **The fee for a Short-Term Rental Permit is \$320.**
6. All Short-Term Rental permits are valid for one year and must be renewed annually. It is your responsibility to timely renew your short-term rental permit. If you fail to do so before the deadline, a citation can be issued by the Lexington County Sheriff's Department for operating a short-term rental land use activity without a permit resulting in penalties and fines and revocation of any further short-term rental use within the County.

#### **SHORT-TERM RENTAL REGULATIONS**

Effective January 1, 2025, short-term rentals can be operated only in accordance with the applicable provisions of Article 13 of the Lexington County Zoning Ordinance, *revised June 25, 2025*. Regulations include, but are not limited, to:

1. Minimum Stay Duration: for a period of no less than two (2) nights;
2. Minimum Guest's Age: the guest making the booking or reservation shall be at least twenty-five (25) years of age;
3. Maximum Occupancy: the maximum occupancy shall not exceed two (2) persons per bedroom, excluding minor children under the age of five (5) per bedroom. Persons over the age of five (5) will be counted as an adult. The bedroom occupancy shall not exceed the capacity of the septic tank.

For a complete description of Regulations and information regarding Short-Term Rentals set forth in Article 13, please access the Lexington County Zoning Ordinance online at <https://www.lex-co.sc.gov/departments/community-development/zoning/zoning-ordinance-information>. All relevant provisions of the Zoning Ordinance will apply to short-term rental land uses. The most restrictive shall apply.

If for any reason your application for a Short Term Rental conflicts with regulations of other County ordinances, or other governmental agencies, the most restrictive shall apply and you may be required to obtain and supply, at your expense, a report of inspection performed by a third-party inspector.

# Short-Term Rental Application

## RENTAL PROPERTY INFORMATION:

Address of Property for Short-Term Rental:

Street address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

TMS/Parcel ID No.: \_\_\_\_\_

Sewer Provider: \_\_\_\_\_ Public (Name of Provider: \_\_\_\_\_)

\_\_\_\_\_ Private/Septic (**Good Operating Condition Report (GOCR) – REQUIRED.**)

Number of Bedrooms: \_\_\_\_\_ (**Floor Plan - REQUIRED**) (\*You may only utilize the number of bedrooms listed with the County Assessor's Office. Please visit <https://www.lex-co.com/PropSearch/#/property> to verify that information.)

Number of Parking Spaces: \_\_\_\_\_ (**Site Plan - REQUIRED**)

Owner Occupied \_\_\_\_\_ Non-Owner Occupied \_\_\_\_\_

## PROPERTY OWNER INFORMATION:

Property Owner(s) Name \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Property Owner(s) Email Address \_\_\_\_\_

Property Owner(s) Phone #'s - include area code \_\_\_\_\_

Is the property noted above registered as your legal residence? \_\_\_\_\_

## HOST/LEASING AGENT/RENTAL COMPANY INFORMATION (if different than property owner):

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Business Name: \_\_\_\_\_

**\*\*PLEASE NOTE:** The property owner and/or registered agent must be willing to take inquiries at all times to address any issues with the short-term rental or provide a designated responsible local representative to receive and address issues with the short-term rental use. The local representative must be authorized to accept service on behalf of the owner/agent and shall be in close proximity and be on site within 45 minutes, if notified of any issues that need to be addressed.

Local Representative Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone #: \_\_\_\_\_ Email address: \_\_\_\_\_

**RENTAL INFORMATION:**

If you plan to market or rent the property using an online platform (i.e., VRBO, Airbnb, etc.), provide the following information. (**\*All online platform listings must be provided.\***)

Platform: \_\_\_\_\_ Rental Unit ID: \_\_\_\_\_ Name of Listing: \_\_\_\_\_

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I certify that my listing(s) meet the Minimum Stay Duration of no less than two (2) days.

\_\_\_\_\_ Yes \_\_\_\_\_ No

I certify that my listing(s) meet the Minimum Guest Age booking requirement of no less than twenty-five (25) years of age.

\_\_\_\_\_ Yes \_\_\_\_\_ No

I certify that my listing(s) meet the Maximum Occupancy requirement of two (2) persons per bedroom - excluding minor children under the age of five (5).

\_\_\_\_\_ Yes \_\_\_\_\_ No

I certify that I understand that any occupants OVER the age of five (5) shall be counted as a person.

\_\_\_\_\_ Yes \_\_\_\_\_ No

I certify that I understand that bedroom occupancy shall not exceed the capacity of the septic tank (if applicable.)

\_\_\_\_\_ Yes \_\_\_\_\_ No

**NEIGHBOR NOTIFICATION CERTIFICATION:**

I certify that I have notified each household or tenant immediately adjacent to the rental and any property, neighborhood, or community association, if applicable, of the use of the property as a short-term rental and have provided each household/tenant and association with the address of the short-term rental and the contact information of the property owner, registered agent, and/or local representative.

\_\_\_\_\_ Yes \_\_\_\_\_ No

**LIFE SAFETY REQUIREMENTS:**

I certify that the Short Term Rental land use activity adheres to all Life Safety Requirements and that the County of Lexington will not be held responsible if those measures are not met.

\_\_\_\_\_ Yes \_\_\_\_\_ No

I certify that there have been no modifications made to the dwelling unit without permits.

\_\_\_\_\_ Yes \_\_\_\_\_ No

**DEED RESTRICTIONS/RESTRICTIVE COVENANTS:**

Is the tract or parcel of land restricted by any deed restrictions or recorded covenants that are contrary to, conflicts with, or prohibits the proposed activity?

\_\_\_\_\_ Yes \_\_\_\_\_ No

**I CERTIFY THAT I HAVE COMPLETELY READ THE APPLICATION PACKET AND HAVE FAMILIARIZED MYSELF WITH ALL REGULATIONS AND REQUIREMENTS CONTAINED IN ARTICLE 13 RELATIVE TO SHORT TERM RENTAL LAND USES. I CERTIFY THAT I UNDERSTAND ALL IT INCLUDES, AND THAT THE INFORMATION I HAVE PROVIDED IN THE APPLICATION AND ASSOCIATED REQUIRED DOCUMENTS, ARE TRUE AND CORRECT.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

I am the:

\_\_\_\_\_ Property Owner

\_\_\_\_\_ Host/Leasing Agent/Rental Company

**(Disclaimer:** Failure to provide the required information or falsifying any requested information, can result in denial of the application, revocation of any previously issued permits, and/or enforcement by the Lexington County Sheriff's Department for operating a land use within the unincorporated jurisdiction Lexington County without proper permitting. *(See Article 17, Chapter 1, Section 171.10 of the Lexington County Zoning Ordinance.)*