

**Sea Pines Forest Preserve Foundation
Beach Trust Property Encroachment Application**

Legal Address of Property: _____

Street Address of Property: _____

Name of Owner: _____

Address of Owner: _____

Phone Number: _____

The undersigned owner of the property described above, hereby applies to the Sea Pines Forest Preserve Foundation, ("Foundation"), for an encroachment agreement within the Beach Trust. The parties acknowledge the Foundation's right to rely upon the prior written approvals of the Office of Ocean and Coastal Resource Management, the Town of Hilton Head as well as the Architectural Review Board and that the Foundation's right to rely on the approvals is absolute. This application is being filed pursuant to the Sea Pines Forest Preserve Foundation Beach Trust Property Policy, (the "Policy") as adopted and revised by the Trustees of the Foundation. Pursuant to the Policy, Community Services Associates, Inc. ("CSA") as sole member of the Foundation is authorized through the Foundation to have an agent of CSA facilitate and approve encroachment agreements for the benefit of the Foundation. The parties acknowledge that once the agent of CSA receives the approvals of the Town of Hilton Head as well as the Architectural Review Board and it is established that no variance or permit from the Office of Ocean and Coastal Resource Management is required then the agent of CSA will approve the encroachment agreement. The parties further acknowledge that if a variance or permit from the Office of Ocean and Coastal Resource Management is obtained by applicant then the agent of CSA will pass the encroachment agreement on to the Trustees of the Foundation for approval. The Trustees may approve or deny any such variance or permit application at their sole discretion. Applicant has read the Policy and agrees to be bound by the terms and conditions contained in the Policy.

Applicant specifically acknowledges that the Encroachment Agreement contains limitation on the rights of Applicant to judicial remedies, in the event of mistakes or error by the Foundation.

Witness	Owner
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Witness	Owner
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Witness	Agent on behalf of Owner
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Date	Date
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Please submit the following:

1. Signed Encroachment Agreement Application
2. Application fee, \$150.00, payable to Community Services Associates, Inc.
3. Letter of Authorization if Application is signed by Agent on behalf of Owner