

Date Received \_\_\_\_\_ Property File \_\_\_\_\_

# Kiawah Island Business License Waiver

Kiawah Island Architectural Review Board • 253 Gardeners Circle, Suite 200 • Johns Island SC 29455 • 843.768.3419 • 843.768.0517 (fax)  
Mailing Address: 130 Gardeners Circle, Suite 123 • Johns Island SC 29455 • arb@kiawah.com • [www.KiawahARB.com](http://www.KiawahARB.com)

I, as the property owner of \_\_\_\_\_ on  
Kiawah Island, SC agree that I personally will be performing all of the minor improvement work stated on the  
attached Kiawah Island Architectural Review Board Construction Application Deposit & Agreement Form. I  
understand that this waiver of a Kiawah Business License does not allow me to perform any work without prior  
Kiawah ARB approval nor does it allow me to hire or delegate the minor improvement work to any other party or  
unlicensed contractor.

Property Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

ARB Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicable Kiawah Island ARB Building Permit # \_\_\_\_\_