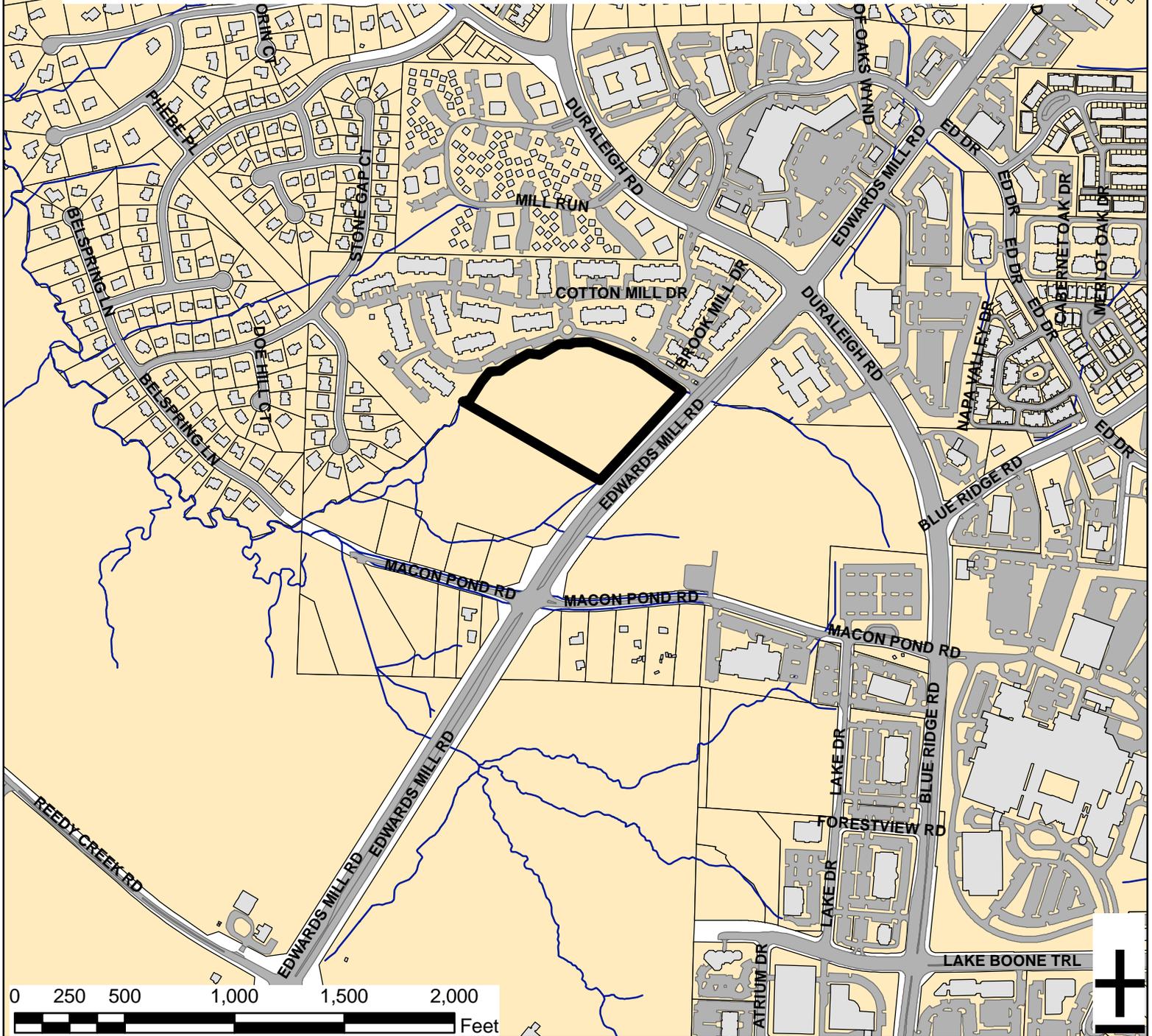


RALEIGH ORTHOPAEDIC SP-48-2010



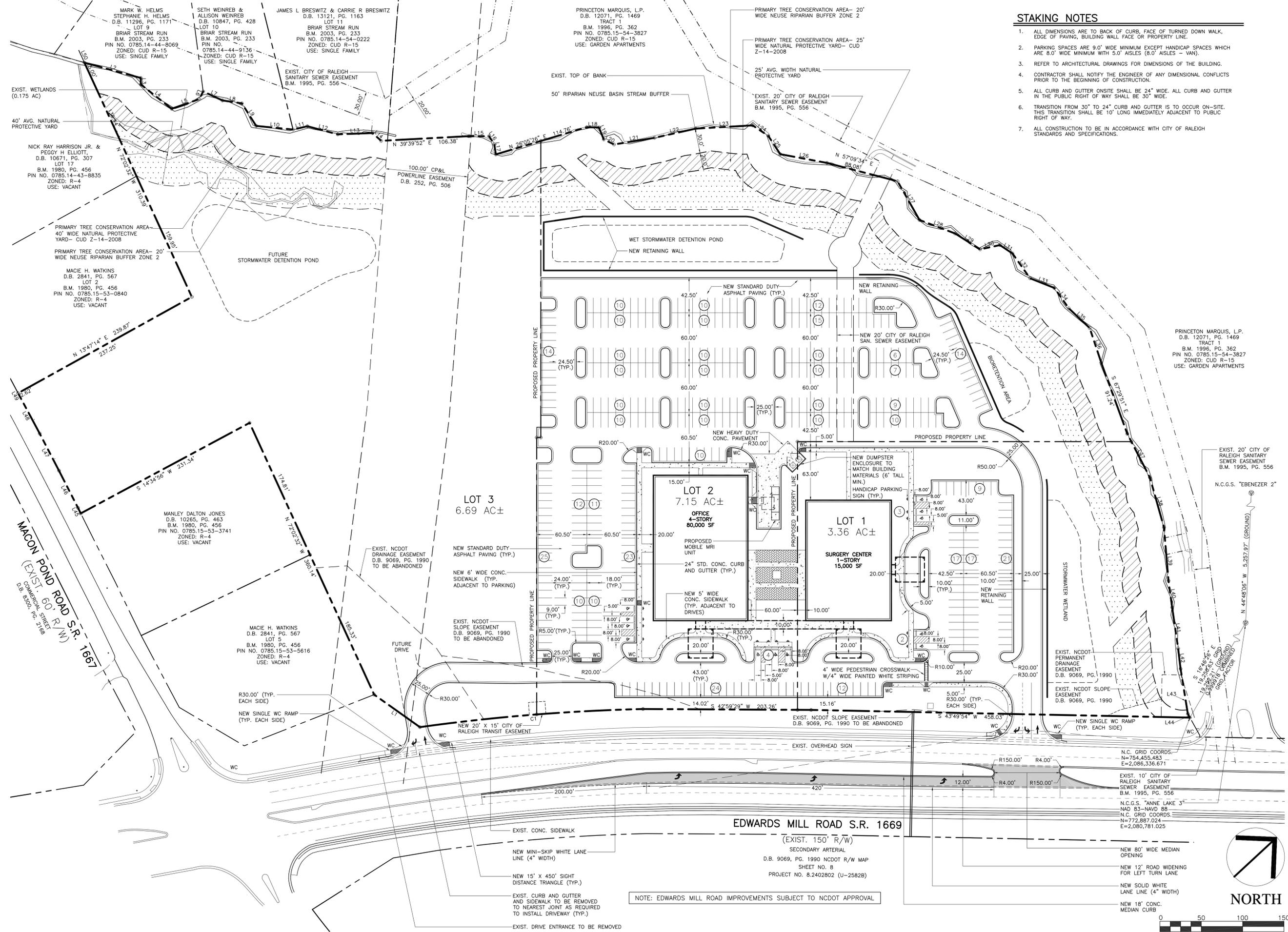
Zoning: **O & I-1 CUD**
CAC: **Northwest**
Drainage
Basin: **Richland Creek**
Acreage: **17.20**

Proposed Use/ Sq. Ft.:
Planner:
Phone:
Applicant Contact:
Phone:

Med. Off./ Surgical Ctr.
Meade Bradshaw
(919) 516-2664
Piedmont Land Design, LLP
(919) 845-7600

STAKING NOTES

1. ALL DIMENSIONS ARE TO BACK OF CURB, FACE OF TURNED DOWN WALK, EDGE OF PAVING, BUILDING WALL FACE OR PROPERTY LINE.
2. PARKING SPACES ARE 9.0' WIDE MINIMUM EXCEPT HANDICAP SPACES WHICH ARE 8.0' WIDE MINIMUM WITH 5.0' AISLES (8.0' AISLES - VAN).
3. REFER TO ARCHITECTURAL DRAWINGS FOR DIMENSIONS OF THE BUILDING.
4. CONTRACTOR SHALL NOTIFY THE ENGINEER OF ANY DIMENSIONAL CONFLICTS PRIOR TO THE BEGINNING OF CONSTRUCTION.
5. ALL CURB AND GUTTER ON-SITE SHALL BE 24" WIDE. ALL CURB AND GUTTER IN THE PUBLIC RIGHT OF WAY SHALL BE 30" WIDE.
6. TRANSITION FROM 30" TO 24" CURB AND GUTTER IS TO OCCUR ON-SITE. THIS TRANSITION SHALL BE 10' LONG IMMEDIATELY ADJACENT TO PUBLIC RIGHT OF WAY.
7. ALL CONSTRUCTION TO BE IN ACCORDANCE WITH CITY OF RALEIGH STANDARDS AND SPECIFICATIONS.



NOTE: EDWARDS MILL ROAD IMPROVEMENTS SUBJECT TO NCDOT APPROVAL



SCALE IN FEET
 REFER TO DWG. NO. PA.1 FOR GENERAL NOTES

F:\Projects\RPEMWROC\Drawings\Site\RPEMWROC_Preliminary\Staking.dwg - STAKING Sep 30, 10 - 12:54pm

SP-48-10



Development SERVICES

FIRE • INSPECTIONS • PLANNING
PUBLIC UTILITIES • PUBLIC WORKS

Customer Service Center
One Exchange Plaza, Suite 400
Raleigh, North Carolina 27601
Phone 919-516-2495
Fax 919-516-2685

Preliminary Development Plan Application

When submitting plans, please check appropriate review type and include the Plan Checklist document.

Preliminary Approvals		FOR OFFICE USE ONLY
<input checked="" type="checkbox"/> Site Plans for Planning Commission or City Council <input type="checkbox"/> Preliminary Administrative Site Plans <input type="checkbox"/> Group Housing * <input type="checkbox"/> Multifamily (Infill)*	<input type="checkbox"/> Subdivision* <input type="checkbox"/> Infill Subdivision* <input type="checkbox"/> Cluster Subdivision <input type="checkbox"/> Expedited Subdivision Review	Transaction Number 284460
* May require Planning Commission or City Council Approval		

Section A

GENERAL INFORMATION

Development Name **Raleigh Orthopaedic**

Proposed Use **Medical Office, Surgical Center**

Property Address(es) **2951 Edwards Mill Road**

Wake County Property Identification Number(s) for each parcel to which these guidelines will apply:

P.I.N. **0785.15-54-6220**

P.I.N.

P.I.N.

P.I.N.

What is your project type?

- Apartment
 Banks
 Elderly Facilities
 Hospitals
 Hotels/Motels
 Industrial Building
 Mixed Residential
 Non-Residential Condo
 Office
 Religious Institutions
 Residential Condo
 Retail
 School
 Shopping Center
 Single Family
 Telecommunication Tower
 Townhouse
 Other: If other, please describe: **Surgical Center**

PRELIMINARY ADMINISTRATIVE REVIEW
Per City Code Section 10-2132.2, summarize the reason(s) this plan can be reviewed administratively not requiring Planning Commission or City Council approval.

PLANNING COMMISSION OR CITY COUNCIL REVIEW
Per City Code Section 10-2132.2, summarize the reason(s) this plan requires Planning Commission or City Council Preliminary Approval.
This site plan shall have Planning Commission Approval as stated by condition (m) of Z-14-1998.

CLIENT (Owner or Developer)

Company **Group I Ventures, LLC**

Name (s) **Karl Stein**

Address **3515 Glenwood Avenue**

Phone **(919) 863-6801** Email **kstein@raleighortho.com** Fax **(919) 863-6842**

CONSULTANT (Contact Person for Plans)

Company **Piedmont Land Design, LLP**

Name (s) **David Lasley**

Phone **(919) 845-7600** Email **david@piedmontlanddesign.com** Fax **(919) 845-7703**

DEVELOPMENT TYPE & SITE DATA TABLE (Applicable to all developments)

Has your project previously been through the pre-submittal process? If yes, provide the transaction #

Zoning District(s) Office & Institutional I CUD	Proposed building use(s) Medical Office and Surgery Center
If more than one district, provide the acreage of each	Existing Building(s) sq. ft. gross 0
Overlay District None	Proposed Building(s) sq. ft. gross 95,000
Total Site Acres 17.20 Inside City Limits <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Total sq. ft. gross (existing & proposed) 95,000
Off street parking Required 290 Provided 458	Proposed height of building(s) 59.0' and 6.1'
GOA (Certificate of Appropriateness) case #	FAR (floor area ratio percentage) 0.21
BOA (Board of Adjustment) case # A	Building Lot Coverage percentage 0.08 (site plans only)
CUD (Conditional Use District) case # Z-14-1998	

Existing Impervious Surface 0	Flood Hazard Area <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Proposed Impervious Surface 246,925 s.f.	If Yes, please provide
Neuse River Buffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Wetlands <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Alluvial Soils CM & MB Flood Study 3720078500J FEMA Map Panel # 0785

CONFORMITY WITH THE COMPREHENSIVE PLAN (Applicable to all developments)

Provide a description of how your plan conforms to the guidelines of the Comprehensive Plan 2030
The proposed development plans conform to the requirements of the Conditional Use Zoning applied to the property which was determined by the City Council to be in compliance with the Comprehensive Plan.

FOR SUBDIVISIONS, MULTIFAMILY OR GROUP HOUSING PROJECTS ONLY

1. Total # Of Townhouse Lots Detached Attached	9. Total number of commercial lots? 3
2. Total # Of Apartment Or Condominium Units	10. Is your project a cluster unit development? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Total # Of Congregate Care Or Life Care Dwelling Units	If Yes, please answer the questions below: a) Minimum Lot Size b) Total # Of Open Space Lots c) Total # Of Phases d) Perimeter Protective Yards Provided e) Must provide open space quotient per City Code 10-3071(5)
4. Total # Of Mobile Home Lots	
5. Overall Total # Of Dwelling Units (1-8 Above)	
6. Bedroom Units 1br 2br 3br 4br or more	
7. Overall Unit(s)/Acre Densities Per Zoning District(s)	
8. If your project is an infill subdivision, provide the infill calculations per City Code 10-3032 on the front cover of your drawing sets	

SIGNATURE BLOCK (Applicable to all developments)

In filing this plan as the property owner(s), I/we do hereby agree and firmly bind ourselves, my/our heirs, executors, administrators, successors and assigns jointly and severally to construct all improvements and make all dedications as shown on this proposed subdivision plan as approved by the City.

I hereby designate David Lasley to serve as my agent regarding this application, to receive and respond to administrative comments, to resubmit plans on my behalf and to represent me in any public meeting regarding this application. I/we have read, acknowledged and affirm that this project is conforming to all application requirements applicable with the proposed development use.

Signed [Signature] Date 9/30/10
Signed [Signature] Date 9/30/10

Section B

TO BE COMPLETED BY APPLICANT

YES N/A

General Requirements

1. Filing Fee for Plan Review – Payments may be made by cash, Visa, Master Card or check made payable to: City of Raleigh	<input checked="" type="checkbox"/>				
2. Preliminary Development Plan Application completed and signed by the property owner	<input checked="" type="checkbox"/>				
3. Client must print page 1 and 2 of the Preliminary Development Plan Application to the plan cover sheet	<input checked="" type="checkbox"/>				
4. I have referenced the Preliminary Development Plan Checklist and by using this as a guide, it will ensure that I receive a complete and thorough first review by the City of Raleigh	<input checked="" type="checkbox"/>				
5. Provide the following plan sheets:	<input checked="" type="checkbox"/>				
a) Cover sheet: includes general notes, owner's name, contact's name, telephone number, mailing address and email address	<input checked="" type="checkbox"/>				
b) Existing Conditions Sheet	<input checked="" type="checkbox"/>				
c) Proposed Site or Subdivision Plan	<input checked="" type="checkbox"/>				
d) Proposed Grading and Stormwater Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
e) Proposed Utility Plan, including Fire	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
f) Proposed Tree Conservation Plan (Submitted w/ Rex Property Subdivision)	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
g) Proposed Landscaping Plan (Landscape Plan not required for commercial subdivisions)	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
h) Building elevations that show maximum height from natural and finished grade, buildings to be removed	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
6. Ten (10) sets of proposed plans to engineering scale (1" = 20', 1" = 100', etc.), and date of preparation. <u>For re-submittals only – include all revision dates</u>	<input checked="" type="checkbox"/>				
7. Plan size 18"x24" or 24"x36"	<input checked="" type="checkbox"/>				
8. A vicinity map no smaller/less than 1"=500' and no larger than 1"=1000' to the inch, showing the position of the subdivision with its relation to surrounding streets and properties, and oriented in the same direction as the preliminary plan	<input checked="" type="checkbox"/>				
9. Include sheet index and legend defining all symbols with true north arrow, with north being at the top of the map	<input checked="" type="checkbox"/>				
10. Digital copy of only the site plan and elevations. The purpose of this image is to illustrate the basic character of the preliminary plan. It should contain only such basic information as: building outline, landscaping, parking and drives, stormwater facilities, and lot boundary. The digital image should be provided in the form of .pdf on a CD. If the plan was not digitally created, provide an 8 ½" x 11" reduction of the plan. Label the CD with the plan name, case file number, and indicate how many times the plan has been resubmitted for review	<input checked="" type="checkbox"/>				
11. Wake County School Form, if dwelling units are proposed	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
12. Preliminary stormwater quantity and quality summary and calculations package	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
13. For secondary tree conservation areas, include two (2) copies of the tree cover report completed by a certified arborist, North Carolina licensed landscape architect, or North Carolina registered forester	<input type="checkbox"/>	<input checked="" type="checkbox"/>			