

# TROLLEY PUB SP-22-2015



0 145 290 Feet

Zoning: **IND-2, DOD**

CAC: **Central**

Drainage Basin: **Rocky Branch**

Acreage: **0.11**

Square Feet: **4,508**

Planner: **Meade Bradshaw**

Phone: **(919) 996-2664**

Applicant: **Trolley Pub**

Phone: **(919) 201-3308**





# Planning & Development

Development Services  
 Customer Service Center  
 One Exchange Plaza  
 1 Exchange Plaza, Suite 400  
 Raleigh, North Carolina 27601  
 Phone 919-996-2495  
 Fax 919-516-2685

SP-22-2015

## 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 type="checkbox"/> Site Plans for Planning Commission <input checked="" type="checkbox"/> Preliminary Administrative Site Plans <input type="checkbox"/> Group Housing ** <input type="checkbox"/> Multifamily (Infill)**	<input type="checkbox"/> Subdivision* <input type="checkbox"/> Cluster Subdivision** <input type="checkbox"/> Infill Subdivision** <input type="checkbox"/> Expedited Subdivision Review <input type="checkbox"/> Conventional Subdivision <input type="checkbox"/> Compact Development <input type="checkbox"/> Conservation Subdivision	Transaction Number <b>427605</b> Assigned Project Coordinator  Assigned Team Leader
* May require Planning Commission or City Council Approval      ** Legacy Districts Only		

Has your project previously been through the Due Diligence process? If yes, provide the transaction #

### GENERAL INFORMATION

Development Name Trolley Pub – Alteration - Beer and Wine Store			
Proposed Use - Retail			
Property Address(es) 323 West Davie St.			
Wake County Property Identification Number(s) for each parcel to which these guidelines will apply: Deed Book 3093, Page 196 / Deed Book 10179, Page 173			
P.I.N. Recorded Deed 1703-57-4387	P.I.N. Recorded Deed	P.I.N. Recorded Deed	P.I.N. Recorded Deed
What is your project type? <input type="checkbox"/> Apartment <input type="checkbox"/> Banks <input type="checkbox"/> Elderly Facilities <input type="checkbox"/> Hospitals <input type="checkbox"/> Hotels/Motels <input type="checkbox"/> Industrial Building <input type="checkbox"/> Mixed Residential <input type="checkbox"/> Non-Residential Condo <input type="checkbox"/> Office <input type="checkbox"/> Religious Institutions <input type="checkbox"/> Residential Condo <input checked="" type="checkbox"/> Retail <input type="checkbox"/> School <input type="checkbox"/> Shopping Center <input type="checkbox"/> Single Family <input type="checkbox"/> Telecommunication Tower <input type="checkbox"/> Townhouse <input type="checkbox"/> Other: If other, please describe:			
PRELIMINARY ADMINISTRATIVE REVIEW	Per City Code Section 10-2132.2, summarize the reason(s) this plan can be reviewed administratively <u>not</u> requiring Planning Commission or City Council approval. <u>No changes to overall building plan or elevations.</u>		
PLANNING COMMISSION	Per City Code Section 10-2132.2, summarize the reason(s) this plan requires Planning Commission or City Council Preliminary Approval. Change of Use		
CLIENT (Owner or Developer)	Company Trolley Pub		Name (s) Mark Herman / Robert Herman
	Address 323 West Davie Street		
	Phone 919-201-3308	<a href="mailto:mark@mshcg.com">mark@mshcg.com</a>	Fax N/A
CONSULTANT (Contact Person for Plans)	Company MSH Consulting Group		Name (s) Mark S. Herman
	Address 300 Wendover Court, Durham, NC 27713		
	Phone 919-201-3306	Email: <a href="mailto:mark@mshcg.com">mark@mshcg.com</a>	Fax N/A

PIN#: 1703574387  
 CAC: Central  
 Zoning: IN02  
 DOD  
 Drainage: Rocky  
 Ace: 0.11

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

Zoning Information		Building Information
Zoning District(s)	<b>IND-2</b>	Proposed building use(s) Retail
If more than one district, provide the acreage of each		Existing Building(s) sq. ft. gross 4508 SF
Overlay District	<b>DOD</b>	Proposed Building(s) sq. ft. gross 4508 SF
Total Site Acres <b>.11</b>	Inside City Limits <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Total sq. ft. gross (existing & proposed) 4508 SF <b>No change</b>
Off street parking Required	Provided Yes	Proposed height of building(s) 18 ft <b>No Change</b>
COA (Certificate of Appropriateness) case #		FAR (floor area ratio percentage)
BOA (Board of Adjustment) case # A-		Building Lot Coverage percentage 0.87% (site plans only)
CUD (Conditional Use District) case # Z-		

Stormwater Information	
Existing Impervious Surface Existing acres/square feet 4508SF	Flood Hazard Area <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Proposed Impervious Surface Existing acres/square feet 4508SF	<b>If Yes, please provide</b>
Neuse River Buffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Wetlands <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Alluvial Soils      Flood Study      FEMA Map Panel #

**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. **No Change to existing building or site.**

**FOR SUBDIVISION, APARTMENT, TOWNHOUSE, CONDOMINIUM PROJECTS ONLY**

1. Total # Of Townhouse Lots      Detached      Attached	11. Total number of all lots
2. Total # Of Single Family Lots	12. Is your project a cluster unit development? <input type="checkbox"/> Yes <input type="checkbox"/> No
3. Total # Of Apartment Or Condominium Units	<b>If Yes, please answer the questions below:</b>
4. Total # Of Congregate Care Or Life Care Dwelling Units	a) Total number of Townhouse Lots
5. Total # Of Mobile Home Lots	b) Total number of Single Family Lots
6. Total Number of Hotel Units	c) Total number of Group Housing Units
7. Overall Total # Of Dwelling Units (1-6 Above)	d) Total number of Open Space Lots
8. Bedroom Units    1br      2br      3br      4br or more	e) Minimum Lot Size
9. Overall Unit(s)/Acre Densities Per Zoning District(s)	f) Total Number of Phases
10. Total number of Open Space (only) lots	g) Perimeter Protective Yard Provided <input type="checkbox"/> Yes <input type="checkbox"/> No
	h) Must provide open space quotient per City Code 10-3071 (5)

**SIGNATURE BLOCK (Applicable to all developments)**

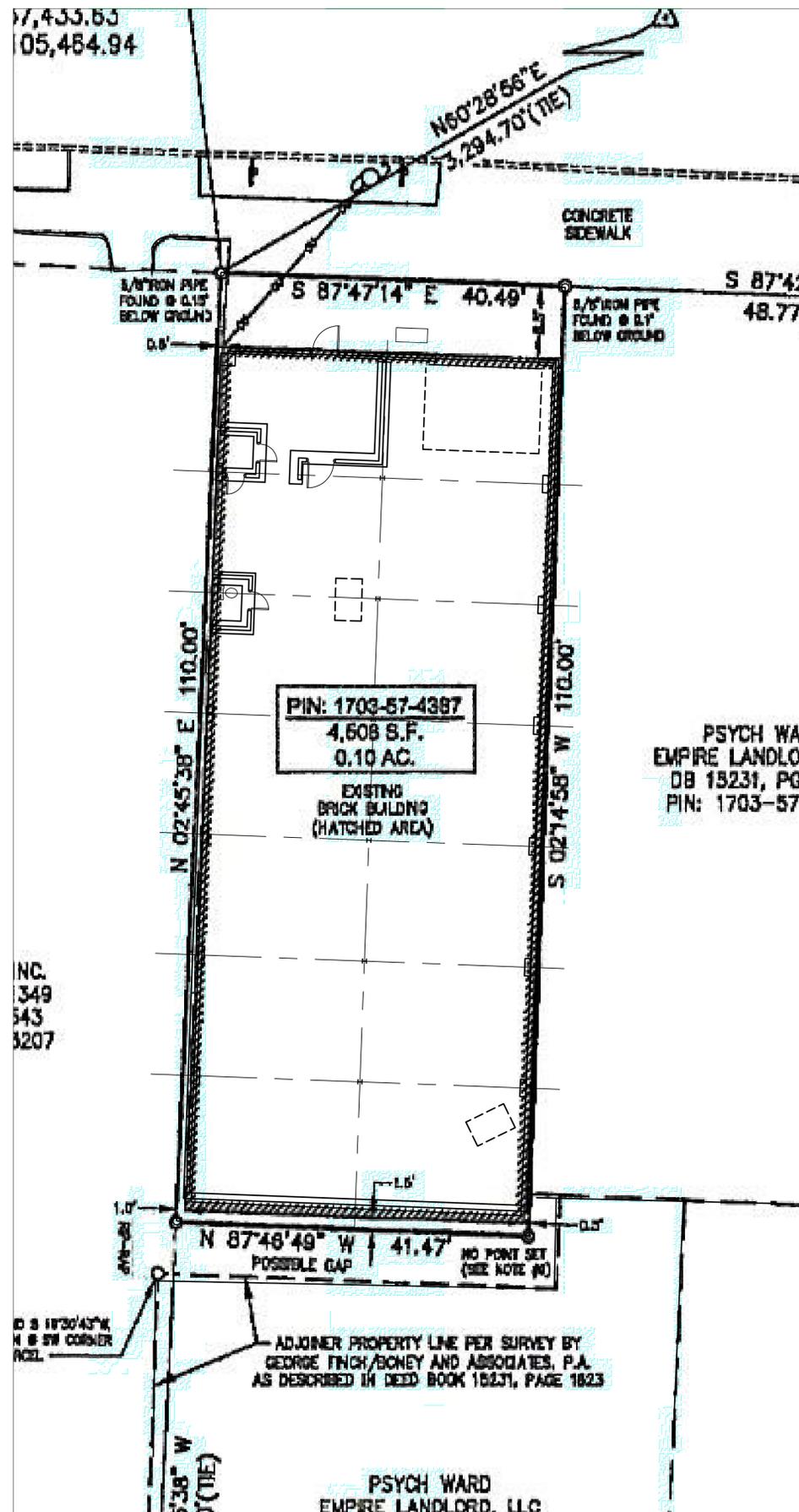
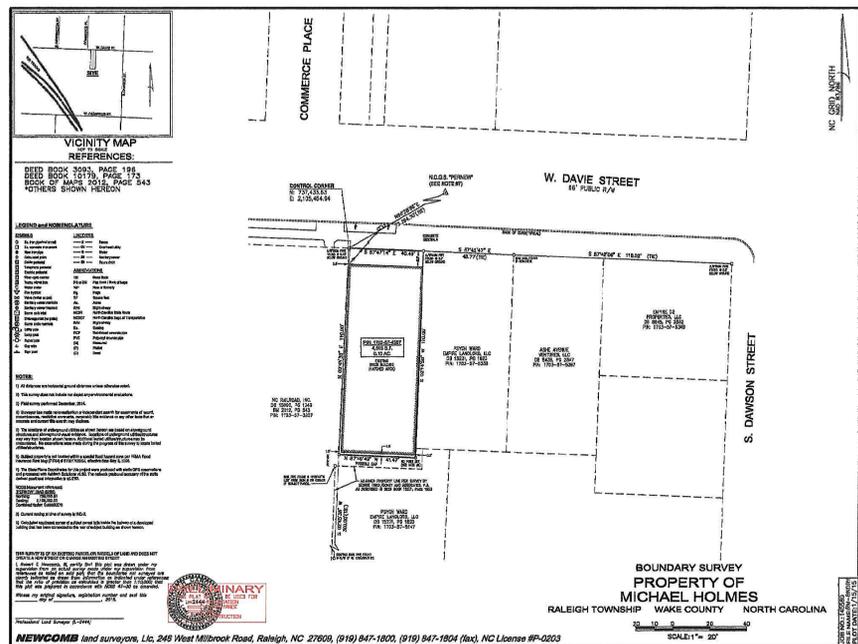
In filing this plan as the property owner(s), I/we do hereby agree and firmly bind ourselves, my/our heirs, executors, administrators, successors and assigns jointly and severally to construct all improvements and make all dedications as shown on this proposed subdivision plan as approved by the City.

I hereby designate MARK HERMAN 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 \_\_\_\_\_ Date March 30, 2015  
 Signed \_\_\_\_\_ Date \_\_\_\_\_

TO BE COMPLETED BY APPLICANT			TO BE COMPLETED BY CITY STAFF		
	YES	N/A	YES	NO	N/A
<b>General Requirements</b>					
1. Filing Fee for Plan Review – Payments may be made by cash, Visa, Master Card or check made payable to: City of Raleigh (No fee for Infill recombination)	<input checked="" type="checkbox"/>				
2. <u>Preliminary Development Plan Application</u> completed and signed by the property owner	<input checked="" type="checkbox"/>		✓		
3. Client must complete and print page 1 and 2 of the <u>Preliminary Development Plan Application</u> to the plan cover sheet (not applicable for infill recombination)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
4. I have referenced the <u>Preliminary Development Plan Checklist</u> 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"/>	<input type="checkbox"/>	✓		
c) Proposed Site or Subdivision Plan	<input checked="" type="checkbox"/>		✓		
d) Proposed Grading and Stormwater Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>			✓
e) Proposed Utility Plan, including Fire	<input type="checkbox"/>	<input checked="" type="checkbox"/>			✓
f) Proposed Tree Conservation Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>			✓
g) Proposed Landscaping Plan (Landscape Plan not required for commercial subdivisions)	<input type="checkbox"/>	<input checked="" type="checkbox"/>			✓
h) Building elevations that show maximum height from natural and finished grade, buildings to be removed	<input type="checkbox"/>	<input checked="" type="checkbox"/>			✓
i) Transportation Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>			✓
6. Ten (10) sets of proposed plans to engineering scale (1" = 20', 1" = 100', etc.), and date of preparation. For re-submittals only – include all revision dates	<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 plan and elevations. 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 type="checkbox"/>	<input checked="" 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"/>			✓



**1**  
**L1.1** **Site Survey**  
Scale: NTS

**2**  
**L1.1** **Existing Conditions Plan**  
Scale: 1" = 100'

04/01/15

**Site Info**

DATE: 04/01/2015  
DRAWN BY: LWB  
CHECKED BY: LWB

**Laurence W Bunch**  
**Architect, A.I.A.**  
171 River Rd.  
Pittsboro, NC 27312

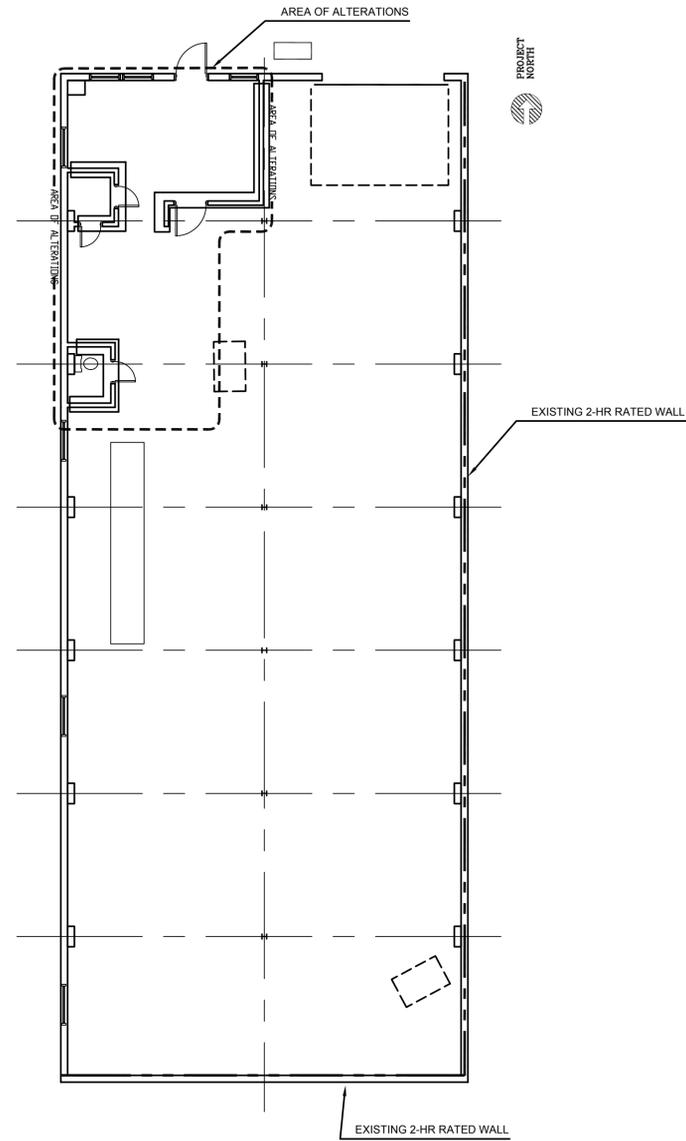


**MSH Consultant Group**  
Food Service Consultant Design & Planning

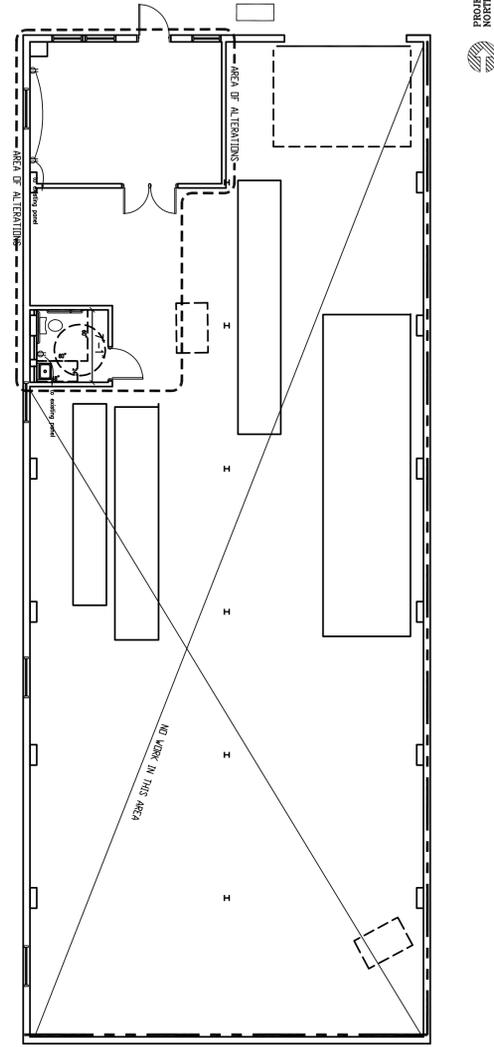
**Trolley Pub**  
**Wine and Beer Store**  
323 West Davie St.  
Raleigh NC

SHEET NO.  
**L1.1**

Restaurant Consultant Design & Planning  
These drawings, specs, and the Design shown are instruments of service and as such remain the property of MSH Consultant Group, (Mark Herman)  
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© COPYRIGHT PROTECTED BY FEDERAL LAW  
Mark Herman, Principal  
Cell: (919) 201-3308/ email: mark@mshcg.com



**1 Existing Floor Plan**  
Scale: 1" = 100'



**2 New Floor Plan**  
Scale: 1" = 100'

**Planning & Development**  
Development Services  
Customer Service Center  
One Exchange Plaza  
1 Exchange Plaza, Suite 400  
Raleigh, North Carolina 27601  
Phone 919-996-2495  
Fax 919-915-2885

**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 type="checkbox"/> Site Plans for Planning Commission	<input type="checkbox"/> Subdivision*
<input checked="" type="checkbox"/> Preliminary Administrative Site Plans	<input type="checkbox"/> Cluster Subdivision**
<input type="checkbox"/> Group Housing**	<input type="checkbox"/> Infill Subdivision**
<input type="checkbox"/> Multi-family (single)**	<input type="checkbox"/> Expedited Subdivision Review
	<input type="checkbox"/> Conventional Subdivision
	<input type="checkbox"/> Conservation Subdivision

\* May require Planning Commission or City Council Approval \*\* Legacy Districts Only

Has your project previously been through the Due Diligence process? If yes, provide the transaction # \_\_\_\_\_

**GENERAL INFORMATION**

Development Name: Trolley Pub - Alteration - Beer and Wine Store  
Proposed Use - Retail  
Property Address(es): 323 West Davie St.  
Wake County Property Identification Number(s) for each parcel to which these guidelines will apply: Deed Book 3095, Page 156 / Deed Book 30170, Page 173  
P.I.N. Recorded Deed: 1703-57-4387 P.I.N. Recorded Deed: P.I.N. Recorded Deed: P.I.N. Recorded Deed: \_\_\_\_\_

What is your project type?  Apartment  Retail  Daycare/Facility  Hospital  Senior/Mobile  Industrial Building  Mixed Residential  Non-Residential Office  Office  Religious Institution  Recreational/Condo  Retail  School  Shopping Center  Single Family  Telecommunication Tower  Townhouse  Other: if other, please describe: \_\_\_\_\_

**PRELIMINARY ADMINISTRATIVE REVIEW** Per City Code Section 10-2332.2, summarize the reason(s) this plan can be reviewed administratively not requiring Planning Commission or City Council approval. No changes to overall building plan or elevations.

**PLANNING COMMISSION** Per City Code Section 10-2332.2, summarize the reason(s) this plan requires Planning Commission or City Council Preliminary Approval. Change of Use: \_\_\_\_\_

**CLIENT (Owner or Developer)**  
Company: Trolley Pub Name(s): Mark Herman / Robert Herman  
Address: 323 West Davie Street  
Phone: 919-203-3308 Email: mark@mschg.com Fax: N/A

**CONSULTANT (Contact Person for Plans)**  
Company: MSH Consulting Group Name(s): Mark S. Herman  
Address: 300 Wendover Court, Durham, NC 27713  
Phone: 919-203-3306 Email: mark@mschg.com Fax: N/A

PRELIMINARY DEVELOPMENT PLAN APPLICATION | 10.01.13

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

Zoning Information	Building Information
Zoning District(s)	Proposed building use(s) Retail
If more than one district, provide the acreage of each	Existing building(s) sq. ft. gross 4508 SF
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Total Site Acres Inside City Limits <input type="checkbox"/> Yes <input type="checkbox"/> No	Total sq. ft. gross (existing & proposed) 4508 SF No change
Off-street parking Required Provided Yes	Proposed height of building(s) 18 ft No Change
COA (Certificate of Appropriateness) case #	FAR (floor area ratio percentage)
BOA (Board of Adjustment) case # A-	Building Lot Coverage percentage 0.87% (site plan only)
CUA (Conditional Use District) case # B-	

**STORMWATER INFORMATION**

Existing Impervious Surface (existing) acres/square feet 4508SF Flood Hazard Area  Yes  No  
Proposed Impervious Surface (existing) acres/square feet 4508SF If Yes, please provide  
Neuse River Buffer  Yes  No Wetlands  Yes  No Alluvial Soils Flood Study FEMA Map Panel # \_\_\_\_\_

**CONFORMITY WITH THE COMPREHENSIVE PLAN (Applicable to all developments)**  
Provide a description of how your plan conforms to the guidelines of the Comprehensive Plan 2035. No Change to existing building or site.

**FOR SUBDIVISION, APARTMENT, TOWNHOUSE, CONDOMINIUM PROJECTS ONLY**

1. Total # of Townhouse Lots Detached Attached	11. Total number of all lots
2. Total # of Single Family Lots	12. Is your project a cluster unit development? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Total # of Apartment Or Condominium Units	If Yes, please answer the questions below:
4. Total # of Congregate Care Or Life Care Dwelling Units	a) Total number of Townhouse Lots
5. Total # of Mobile Home Lots	b) Total number of Single Family Lots
6. Total Number of Hotel Units	c) Total number of Group Housing Units
7. Overall Total # of Dwelling Units (1-6 Above)	d) Total number of Open Space Lots
8. Bedroom Units 3br 2br 3br 4br or more	e) Minimum Lot Size
9. Overall Units/Acre Densities Per Zoning District(s)	f) Total Number of Phases
10. Total number of Open Space (m2) lots	g) Perimeter Protective Yard Provided <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	h) Must provide open space quotient per City Code 10-3073 (5)

**SIGNATURE BLOCK (Applicable to all developments)**

I, the undersigned (as the property owner(s)), 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 Mark Herman to serve as my agent regarding this application, to receive and respond to administrative comments, to maintain plans on my behalf and to represent me in any public meeting regarding this application. I have read, acknowledged and affirm that this project is conforming to all application requirements applicable with the proposed development use.

Signature: Mark Herman Date: March 20, 2015

PRELIMINARY DEVELOPMENT PLAN APPLICATION | 10.01.13

1) Cover sheet: includes general notes, owner's name, contact's name, telephone number, mailing address and email address	<input type="checkbox"/>
2) Existing Conditions Sheet	<input type="checkbox"/>
3) Proposed Site Plan	<input type="checkbox"/>
4) Proposed Grading and Stormwater Plan; Approach to Stormwater	<input type="checkbox"/>
5) Proposed Utility Plan, including Fire	<input type="checkbox"/>
6) Proposed Tree Conservation Plan	<input type="checkbox"/>
7) Proposed Landscaping Plan	<input type="checkbox"/>
8) Building elevations that show maximum height of buildings to be removed	<input type="checkbox"/>
9) Transportation Plan	<input type="checkbox"/>
10) Ten (10) sets of proposed plans to engineering scale (1" = 20', 1" = 100', etc.), and date of preparation. For re-submittals - include all revision dates	<input type="checkbox"/>
11) Minimum plan size 18"x24" not to exceed 36"x42"	<input type="checkbox"/>
12) A vicinity map no smaller than 1" = 200' and no larger than 1" = 1000' to the inch, showing the position of the plan with its relation to surrounding streets and properties, and oriented in the same direction as the preliminary plan	<input type="checkbox"/>
13) Include sheet index and legend defining all symbols with true north arrow, with north being at the top of the map	<input type="checkbox"/>
14) Digital copy of only the plan and elevations. Label the CD with the plan name, case file number, and indicate how many times the plan has been resubmitted for review	<input type="checkbox"/>
15) Wake County School Form, if dwelling units are proposed	<input type="checkbox"/>
16) Preliminary stormwater quantity and quality summary and calculations package	<input type="checkbox"/>
17) 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"/>

Restaurant Consultant Design & Planning  
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Mark Herman, Principal  
Cell: (919) 201-3308/ email: mark@mschg.com

04/01/15

**Plans**  
DATE: 04/01/2015  
DRAWN BY: LWB  
CHECKED BY: LWB

**Laurence W Bunch**  
Architect, A.I.A.  
171 River Rd.  
Pittsboro, NC 27712

**MSH Consultant Group**  
Food Service Consultant Design & Planning

**Trolley Pub**  
Wine and Beer Store  
323 West Davie St.  
Raleigh NC

SHEET NO.  
**L1.2**