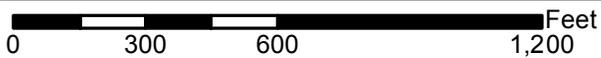
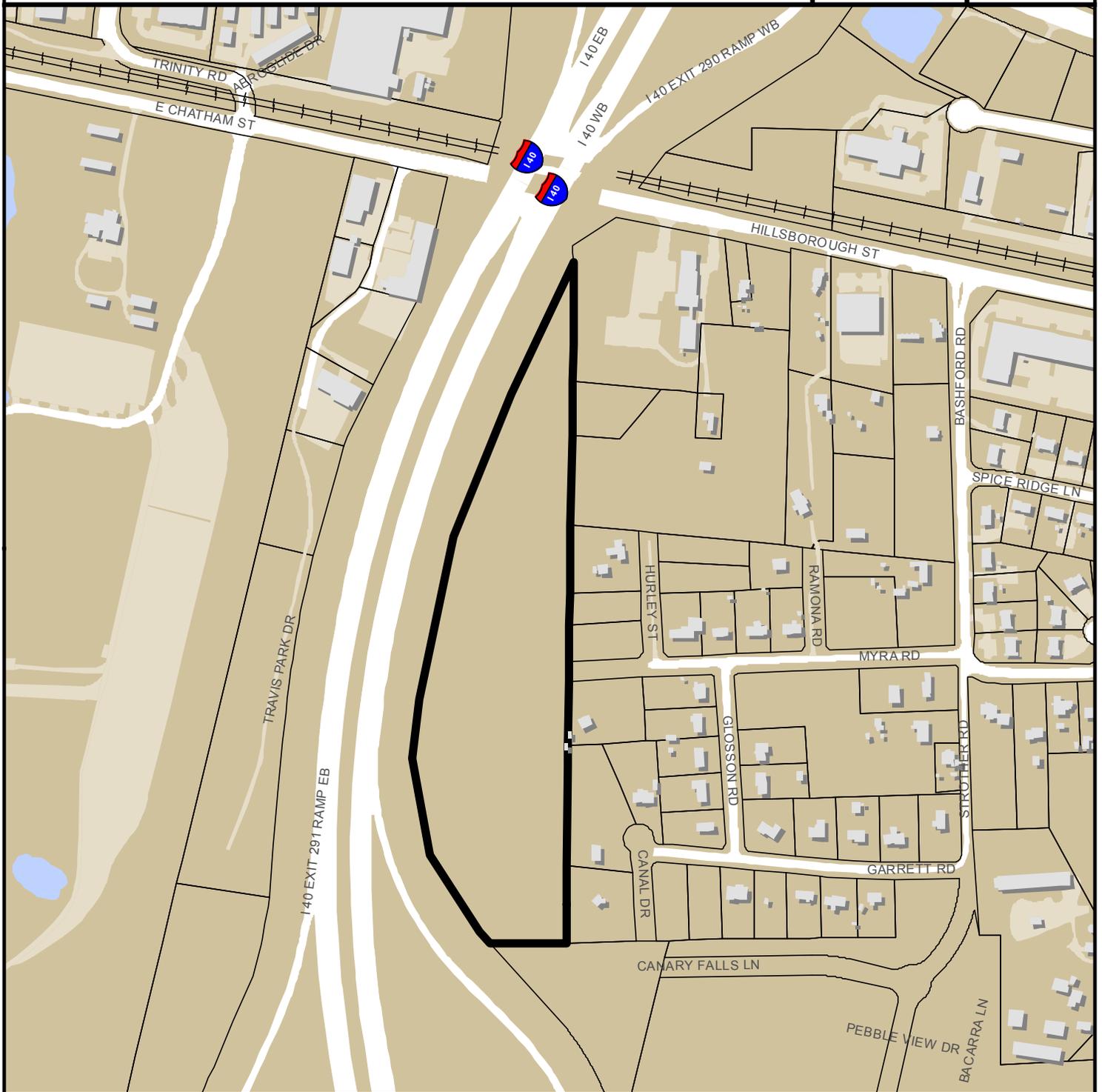


BACARRA II SR-14-2014



Zoning: **RX-4-CU w/SHOD-1**
CAC: **West**
Drainage Basin: **Richland Creek**
Acreage: **15.37**
Square Feet: **274,125**

Planner: **Justin Rametta**
Phone: **(919) 996-2665**
Applicant: **CIP Construction
Company**
Phone: **(336) 207-7484**





Planning & Development

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

Administrative Site Review Application For UDO Districts Only

SR-14-14

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

Building Type		FOR OFFICE USE ONLY
<input type="checkbox"/> Detached <input type="checkbox"/> Attached <input checked="" type="checkbox"/> Apartment <input type="checkbox"/> Townhouse	<input type="checkbox"/> General <input type="checkbox"/> Mixed Use <input type="checkbox"/> Open Lot	Transaction Number <i>417126</i> Assigned Project Coordinator Assigned Team Leader

Has your project previously been through the Due Diligence process? If yes, provide the transaction # 403415

GENERAL INFORMATION

Development Name **Bacarra II**

Zoning District **RX-4-CU w/SHOD-1**

Proposed Use **Apartments**

Property Address(es) **6300 Canary Falls Lane (previously 6815 Hillsborough Street)**

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

P.I.N. Recorded Deed	P.I.N. Recorded Deed	P.I.N. Recorded Deed	P.I.N. Recorded Deed
0774-41-7095			

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 Cottage Court Other: If other, please describe:

WORK SCOPE	Per City Code Section 10.2.8.D.1, summarize the project work scope. Development for an apartment community.		
DESIGN ADJUSTMENT OR ADMIN ALTERNATE	Per City Code Chapter 8, summarize if your project requires either a design adjustment, or Section 10 - Alternate Administrative AE Design adjustment to place sidewalk on the back of curb for a multi-family street section and to place street trees behind the sidewalk.		
CLIENT/DEVELOPER/ OWNER	Company CIP CONSTRUCTION	Name (s)	
	Address 201 N ELM ST SUITE 201		
	Phone (336) 275-6198	Email DBURTON@CIPCONST.COM	Fax
CONSULTANT (Contact Person for Plans)	Company Priest, Craven & Assoc., Inc.	Name (s) Bradley Bowling	
	Address 3803-B Computer Drive, Ste. 104, Raleigh, NC 27609		
	Phone 919-781-0300	Email bbowling@priestcraven.com	Fax 919-782-1288

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

Zoning Information		Building Information	
Zoning District(s) RX-4-CU		Proposed building use(s) Apartments	
If more than one district, provide the acreage of each		Existing Building(s) sq. ft. gross	
Overlay District SHOD-1		Proposed Building(s) sq. ft. gross +/- 274,125 s.f.	
Total Site Acres Inside City Limits <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 18.63 Acres		Total sq. ft. gross (existing & proposed)	
Off street parking Required 440 Provided 480		Proposed height of building(s) 42 Stories 3	
COA (Certificate of Appropriateness) case #		FAR (floor area ratio percentage)	
BOA (Board of Adjustment) case # A-		Building Lot Coverage percentage 11.32 (site plans only)	
CUD (Conditional Use District) case # Z-4-14		Height of 1 st Floor 9.7 ft.	
Stormwater Information			
Existing Impervious Surface acres/square feet 0.10 Acres		Flood Hazard Area <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Proposed Impervious Surface acres/square feet 7.15 Acres		If Yes, please provide	
Neuse River Buffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Wetlands <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Alluvial Soils	Flood Study FEMA Map Panel #

FOR RESIDENTIAL DEVELOPMENTS

1. Total # Of Apartment, Condominium or Residential Units 192	7. Open Space (only) or Amenity Outdoor Amenity
2. Total # Of Congregate Care Or Life Care Dwelling Units	8. Is your project a cluster unit development? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Total Number of Hotel Units	
4. Overall Total # Of Dwelling Units (1-6 Above) 192	
5. Bedroom Units 1br 48 2br 96 3br 48 4br or more	
6. Infill Development 2.2.7	

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 development plan as approved by the City.

I hereby designate Bradley Bowling, Priest, Craven & Associates, Inc. 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, acknowledge and affirm that this project is conforming to all application requirements applicable with the proposed development use.

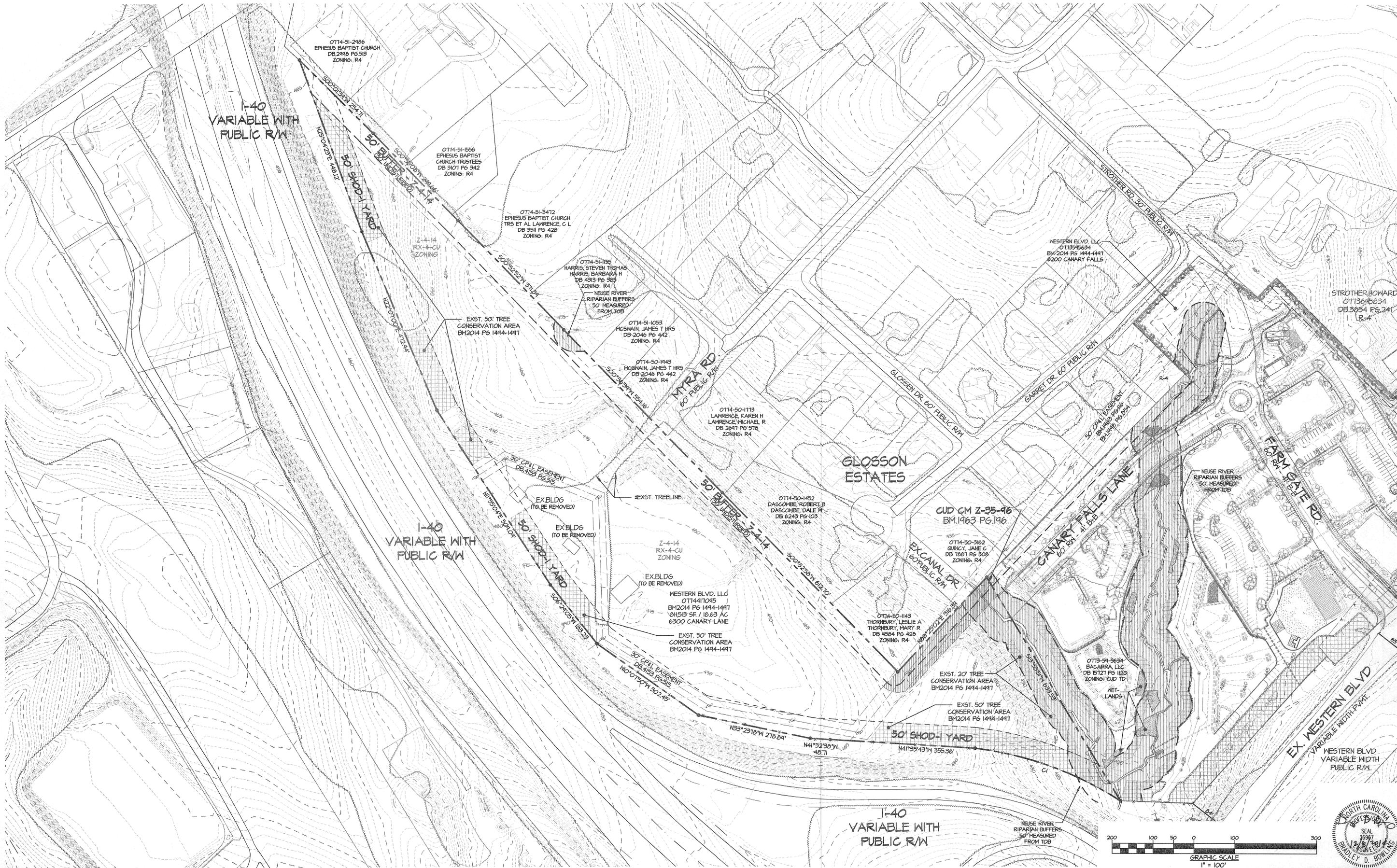
Signed _____ Date **12/3/14**
 Signed CARROLL FUND I, LLC ROY E CARROLL, JR. MANAGER Date _____

	TO BE COMPLETED BY APPLICANT		TO BE COMPLETED BY CITY STAFF		
	YES	N/A	YES	NO	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 (No fee for Infill recombination)	<input checked="" type="checkbox"/>		✓		
2. Site Review completed and signed by the property owner	<input checked="" type="checkbox"/>		✓		
3. Client must complete and print page 1 and 2 of the Site Review to the plan cover sheet (not applicable for infill recombination)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
4. I have referenced the Site Review 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 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 Plan	<input checked="" type="checkbox"/>		✓		
d) Proposed Grading and Stormwater Plan; Approach to Stormwater	<input checked="" type="checkbox"/>		✓		
e) Proposed Utility Plan, including Fire	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
f) Proposed Tree Conservation Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
g) Proposed Landscaping Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
h) Building elevations that show maximum height of buildings to be removed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
i) Transportation Plan	<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 – include all revision dates</u>	<input checked="" type="checkbox"/>		✓		
7. Minimum plan size 18"x24" not to exceed 36"x42"	<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 plan 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 checked="" type="checkbox"/>	<input 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"/> *			✓

*Previously approved under S-18-12

15.37 AC. Walnut # Richland Drainage West-CAC
Zoning Shad 1 RX-4-CU



F:\LAND PROJ\EGIS\NOTES\2012-003.002.GPJ - BACARRA 2 - RALEIGH\GND\PREL\PART1\122-PRE-EXIST-COND.DWG - Dec 08, 2014 - 1:20 PM - GEL/KNO

PRELIMINARY - NOT RELEASED FOR CONSTRUCTION

