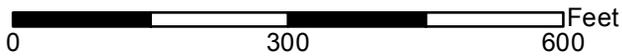


# NOWELL PROPERTY SUBDIVISION S-75-2015



Zoning: **R-10, SRPOD**

CAC: **West**

Drainage Basin: **Bushy Branch**

Acreage: **0.54**

Number of Lots: **2**

Planner: **Justin Rametta**

Phone: **(919) 996-2665**

Applicant: **Nowell Senior Trust**





# 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

5-75-15

## 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<br><input type="checkbox"/> Preliminary Administrative Site Plans<br><input type="checkbox"/> Group Housing **<br><input type="checkbox"/> Multifamily (Infill)**   | <input checked="" type="checkbox"/> Subdivision*<br><input type="checkbox"/> Cluster Subdivision**<br><input type="checkbox"/> Infill Subdivision**<br><input type="checkbox"/> Expedited Subdivision Review<br><input type="checkbox"/> Conventional Subdivision<br><input type="checkbox"/> Compact Development<br><input type="checkbox"/> Conservation Subdivision | Transaction Number<br><b>454493</b><br>Assigned Project Coordinator<br><br>Assigned Team Leader |                         |
| * May require Planning Commission or City Council Approval      ** Legacy Districts Only  |  |   |                         |
| <b>Has your project previously been through the Due Diligence process? If yes, provide the transaction #</b>  |  |   |                         |
| <b>GENERAL INFORMATION</b>  |  |   |                         |
| Development Name <b>SUBDIVISION OF LOT 24 WESTERN PARK INTO LOTS 1 &amp; 2 NOWELL PROPERTY</b>  |  |   |                         |
| Proposed Use <b>RESIDENTIAL</b> <span style="float: right;">Sub 2</span>  |  |   |                         |
| Property Address(es) <b>145 PIINELAND CIRCLE</b>  |  |   |                         |
| Wake County Property Identification Number(s) for each parcel to which these guidelines will apply:   |  |   |                         |
| P.I.N. Recorded Deed<br><b>0784 52 8076</b>   | P.I.N. Recorded Deed   | P.I.N. Recorded Deed  | P.I.N. Recorded Deed    |
| <b>What is your project type?</b> <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<br><input checked="" 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 type="checkbox"/> Retail <input type="checkbox"/> School <input type="checkbox"/> Shopping Center<br><input type="checkbox"/> Single Family <input type="checkbox"/> Telecommunication Tower <input type="checkbox"/> Townhouse <input type="checkbox"/> Other: If other, please describe: |  |   |                         |
| <b>PRELIMINARY ADMINISTRATIVE REVIEW</b>  | 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.   |   |                         |
| <b>PLANNING COMMISSION</b>  | Per City Code Section 10-2132.2, summarize the reason(s) this plan requires Planning Commission or City Council Preliminary Approval.  |   |                         |
| <b>CLIENT (Owner or Developer)</b>  | Company <b>NOWELL SENIOR TRUST</b>   | Name (s) <b>MIKE NOWELL</b>   |                         |
|   | Address <b>P O BOX 46646, RALEIGH, N. C. 27620 6646</b>  |   |                         |
|   | Phone  | Email   | Fax                     |
| <b>CONSULTANT (Contact Person for Plans)</b>  | Company <b>JOHN Y. PHELPS-SURVEYOR</b>   | Name (s) <b>JOHN Y. PHELPS PL-1319</b>  |                         |
|   | Address <b>P O BOX 30122 RALEIGH, N.C. 27612</b>   |   |                         |
|   | Phone <b>919 787-3658</b>  | Email <b>JR81@BELLSOUTH.NET</b>   | Fax <b>919 787-6727</b> |

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

| Zoning Information   | Building Information  |
|--|---|
| Zoning District(s) <b>RESIDENTIAL-10</b>   | Proposed building use(s) <b>SINGLE FAMILY HOME ON LOT 1</b> |
| If more than one district, provide the acreage of each   | Existing Building(s) sq. ft. gross <b>2,014 S.F.</b>        |
| Overlay District   | Proposed Building(s) sq. ft. gross <b>UNKNOWN</b>           |
| Total Site Acres      Inside City Limits <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Total sq. ft. gross (existing & proposed)                   |
| Off street parking Required      Provided <b>PROVIDED</b>  | Proposed height of building(s)                              |
| COA (Certificate of Appropriateness) case #  | FAR (floor area ratio percentage)                           |
| BOA (Board of Adjustment) case # A-  | Building Lot Coverage percentage      (site plans only)     |
| CUD (Conditional Use District) case # Z-   |   |

**Stormwater Information**

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

**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.

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

|   |   |
|---|---|
| 1. Total # Of Townhouse Lots      Detached <input type="checkbox"/> ONE-LOT 1 Attached <input type="checkbox"/> | 11. Total number of all lots <b>TWO</b>   |
| 2. Total # Of Single Family Lots <b>ONE- LOT 1</b>  | 12. Is your project a cluster unit development? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |
| 3. Total # Of Apartment Or Condominium Units <b>4 FAMILT APT. LOT2</b>  | If Yes, please answer the questions below:<br><br><b>a)</b> Total number of Townhouse Lots<br><b>b)</b> Total number of Single Family Lots<br><b>c)</b> Total number of Group Housing Units<br><b>d)</b> Total number of Open Space Lots<br><b>e)</b> Minimum Lot Size<br><b>f)</b> Total Number of Phases<br><b>g)</b> Perimeter Protective Yard Provided <input type="checkbox"/> Yes <input type="checkbox"/> No<br><b>h)</b> Must provide open space quotient per City Code 10-3071 (5) |
| 4. Total # Of Congregate Care Or Life Care Dwelling Units <b>NONE</b>   |   |
| 5. Total # Of Mobile Home Lots <b>NONE</b>  |   |
| 6. Total Number of Hotel Units <b>NONE</b>  |   |
| 7. Overall Total # Of Dwelling Units (1-6 Above)  |   |
| 8. Bedroom Units    1br      2br      3br      4br or more  |   |
| 9. Overall Unit(s)/Acre Densities Per Zoning District(s)  |   |
| 10. Total number of Open Space (only) lots  |   |

**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 John Y. Phelps, Jr. 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 Michael Nowell SR 11-23-15 TRUST Date

Signed Mike Nowell Trustee Date

**Nowell Senior Trust**

|   | 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. <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 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"/> |                               |    |     |