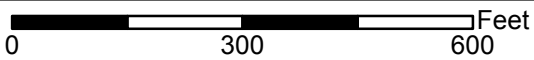
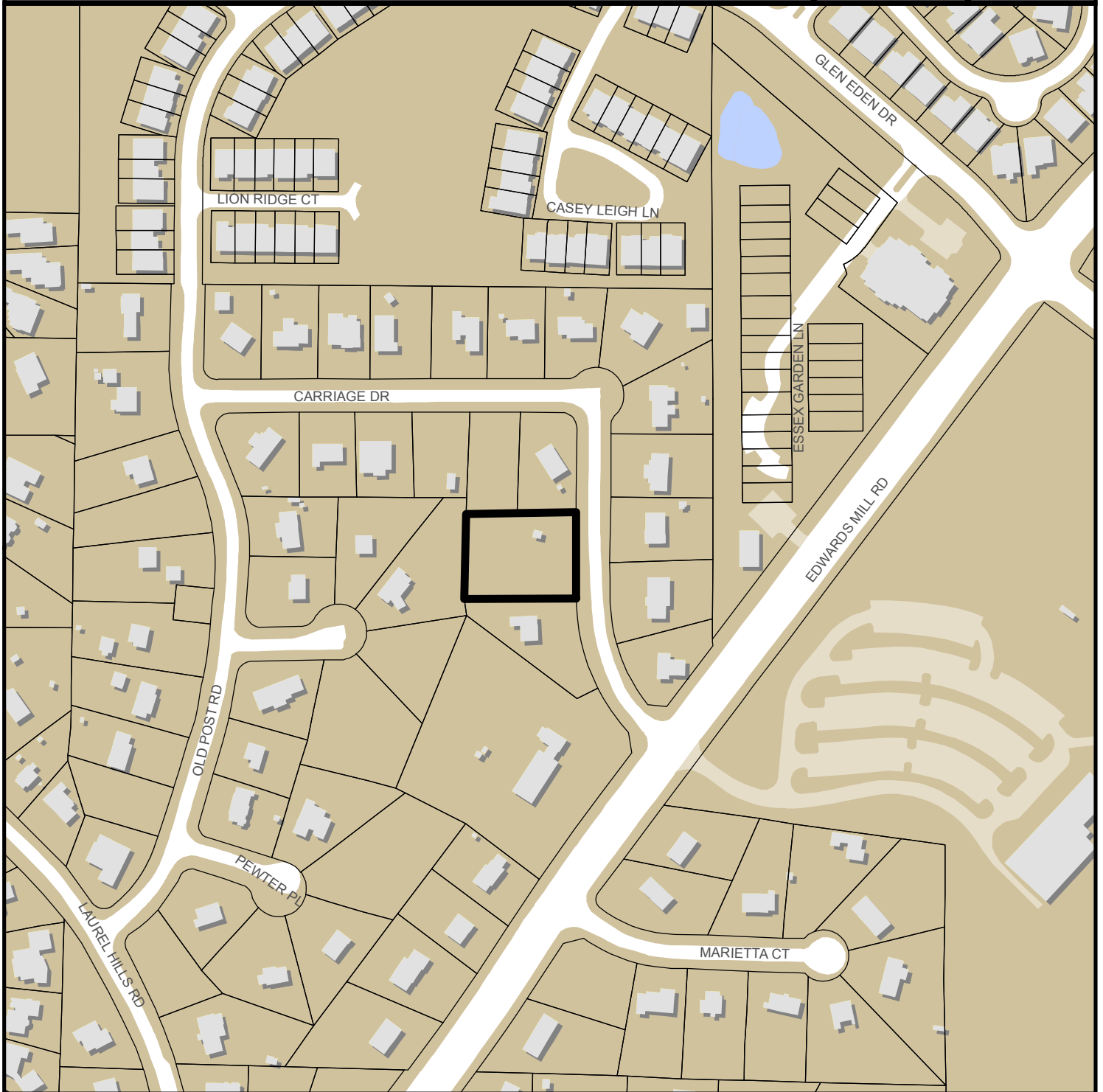


CARRIAGE HILLS SUBDIVISION S-71-2016



Zoning: **R-4**

CAC: **Northwest**

Drainage Basin: **Crabtree Basin**

Acreage: **.66**

Number of Lots: **2**

Planner: **Martha Lobo**

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

Applicant: **Lester Stancil**

Phone: **(919) 639-2133**



Preliminary Subdivision Plan Application



**DEVELOPMENT
SERVICES
DEPARTMENT**

Development Services Customer Service Center | 1 Exchange Plaza, Suite 400 | Raleigh, NC 27601 | 919-996-2495 | efax 919-996-1831
Litchford Satellite Office | 8320 - 130 Litchford Road | Raleigh, NC 27601 | 919-996-4200

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

Office Use Only: Transaction # 487414		Project Coordinator		Team Leader Lobo 3	
PRELIMINARY APPROVALS					
<input type="checkbox"/> Subdivision * <input checked="" type="checkbox"/> Conventional Subdivision <input type="checkbox"/> Compact Development <input type="checkbox"/> Conservative Subdivision					
*May require City Council approval if in a Metro Park Overlay or Historic Overlay District					
If your project has been through the Due Diligence process, provide the transaction #:					
GENERAL INFORMATION					
Development Name Coventional Subdivision for Sanaa Wehbi					
Proposed Use Residential					
Property Address(es) 3509 Carriage Drive Raleigh, NC 27612					
Wake County Property Identification Number(s) for each parcel to which these guidelines will apply: 0785.08-87-4753					
PIN Recorded Deed 11922, Page 194		PIN Recorded Deed		PIN Recorded Deed	
What is your project type?					
<input type="checkbox"/> Single family <input type="checkbox"/> Townhouse <input checked="" type="checkbox"/> Subdivision in a non-residential zoning district					
<input type="checkbox"/> Other (describe):					
OWNER/DEVELOPER INFORMATION					
Company Name			Owner/Developer Name Sanaa Wehbi		
Address 3500 Carriage Drive Raleigh, NC 27612					
Phone 919-271-2863		Email		Fax	
CONSULTANT/CONTACT PERSON FOR PLANS					
Company Name Stancil and Associates			Contact Name Lester Stancil		
Address PO Box 730 Angier, NC 27501					
Phone 919-639-2133		Email stancilsurvey@gmail.com		Fax 919-639-2602	

DEVELOPMENT TYPE AND SITE DATE TABLE (Applicable to all developments)

ZONING INFORMATION

Zoning District(s) **R-4**

If more than one district, provide the acreage of each:

Overlay District? Yes No

Inside City Limits? Yes No

CUD (Conditional Use District) Case # Z- **N/A**

COA (Certificate of Appropriateness) Case # **N/A**

BOA (Board of Adjustment) Case # A- **N/A**

STORMWATER INFORMATION

Existing Impervious Surface **None** acres/sf Flood Hazard Area Yes No

Proposed Impervious Surface **TBD** acres/sf Neuse River Buffer Yes No

Wetlands Yes No

If in a Flood Hazard Area, provide the following:

Alluvial Soils Flood Study FEMA Map Panel #

NUMBER OF LOTS AND DENSITY

Total # of Townhouse Lots: Detached **0** Attached **0**

Total # of Single Family Lots **2** Total # of All Lots **2**

Overall Unit(s)/Acre Densities Per Zoning Districts **2**

Total # of Open Space and/or Common Area Lots **0**

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 _____ 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.

Sanaa Wehbi 09/13/2016
Signature Date

Signature Date

GENERAL REQUIREMENTS	TO BE COMPLETED BY APPLICANT		OFFICE USE ONLY		
	YES	N/A	YES	NO	N/A
1. Applicant must contact a Planner to determine if a Pre-Application Conference is required prior to application submittal	<input checked="" type="checkbox"/>		✓		
2. Filing fee for plan review – payments may be made by cash, Visa, Mastercard, or check made payable to the City of Raleigh (no fee for infill recombination)	<input checked="" type="checkbox"/>		✓		
3. Preliminary Subdivision Plan Application must be completed and signed by the property owner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
4. Applicant must complete and print page 1 and 2 of the Preliminary Subdivision Plan Application to the plan cover sheet (not applicable for infill recombination)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
5. I have referenced the Preliminary Subdivision Plan Checklist, and by using this as a guide, it will ensure that I receive a complete and thorough first review by the City	<input checked="" type="checkbox"/>		✓		
6. Provide the following plan sheets:	<input checked="" type="checkbox"/>				
a) Cover sheet, to include general notes, owner's name, contact's name, phone number, mailing address, email address	<input checked="" type="checkbox"/>		✓		
b) Existing conditions sheet	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
c) Proposed 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 checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
f) Proposed Tree Conservation Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>			✓
g) Proposed Landscaping	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
h) Transportation Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
7. 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"/>		✓		
8. Plan size must be 18" x 24" or 24" x 36"	<input checked="" type="checkbox"/>		✓		
9. 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"/>		✓		
10. 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"/>		✓		
11. 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"/>		✓		
12. Wake County School form, if dwelling units are proposed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	✓		
13. Preliminary stormwater quantity and quality summary and calculations package	<input type="checkbox"/>	<input checked="" type="checkbox"/>			✓
14. 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"/>			✓