



City of Salisbury
 Development Services
 110 North Main Street
 Salisbury, NC 28144
 Ph. 704.638.5207
 Ph. 704.638.5242 (planning)
 Fax 704.638.8494

SPECIAL USE PERMIT APPLICATION

SHADED AREAS FOR STAFF USE ONLY

FILING DATE: _____

REVIEW FEE: \$250.00

CASE NUMBER: _____

(FORM LAST REVISED 03.13.09)

Special Use Permit (LDO Sec. 15.17)

List Special Use(s): _____

Special uses are land uses that are generally compatible with the land uses permitted by right in a zoning district, but which require individual review of their location, design, and configuration so as to evaluate the potential for adverse impacts on adjacent property and uses. The evaluation and approval of the Special Use Permit is governed by quasi-judicial proceedings, which are based on sworn testimony and evidence presented at the public hearing.

CONTACT INFORMATION

Owner: _____ Phone: _____

Address: _____
 _____ email: _____

Applicant: _____ Phone: _____

Address: _____
 _____ email: _____

Project Contact: _____ Phone: _____

Address: _____
 _____ email: _____

PROPERTY INFORMATION

Rowan County Parcel ID(s):

Address: _____

General Description: _____

Zoning District(s): Zoning Overlay(s):

SIGNATURE

I certify that no work nor this special use have commenced prior to issuance of the Special Use Permit, that all information provided on this application is accurate and true, and that all work will be performed to meet the laws of the State of North Carolina, the standards of the Salisbury Land Development Ordinance, and the City of Salisbury Uniform Construction Standards Manual. Submission of this application does not constitute a granting of approval or issuance of any permit. The City of Salisbury reserves the right to request additional information to ensure complete review.

Applicant: _____

GATHERING OF EVIDENCE

Project Title: _____

Evidence supporting the following standards shall be provided in writing prior to advancement of this application to Planning Board and City Council for their consideration.

Evidence may be submitted in other forms, such as market studies, imagery, and data; however, written responses to all applicable standards shall be provided in this application.

A. The use meets all required principles and specifications of the Ordinance and any adopted land use plans and is in harmony with the general purpose and intent and preserves its spirit:

B. The proposed plan as submitted and approved will be visually and functionally compatible to the surrounding area:

C. The public health, safety, and welfare will be assured and the proposed development will not substantially injure the value of adjoining property and associated uses if located where proposed:

Additional standards for specific special uses (to be provided by the city and completed by applicant):

PROJECT INFORMATION

Project Title: _____

Present Use: _____

Number, type, and condition of any existing structures:

List any known nonconformities:

Project Type (*check all that apply*): Residential Commercial Industrial Other _____

- For Residential: Total # residential units: _____
Proposed overall density (du/ac.): _____
- For Commercial: Total square footage (GFA): _____
- For Industrial: Total square footage (GFA): _____
- For Other: Total square footage (GFA): _____

Proposed Building Type (*check all that apply*):

- | | | | |
|-------------------------------------|--|--|------------------------------------|
| <input type="checkbox"/> House | <input type="checkbox"/> Townhouse | <input type="checkbox"/> Apartment | <input type="checkbox"/> Mixed-Use |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Institutional | <input type="checkbox"/> Public Landmark | <input type="checkbox"/> Other |

Total Acreage: _____ Project Acreage: _____

Provide overall project built-upon area (%) for NPDES determination: _____

(applicable for projects over 1 acre or part of a larger common plan of development—Sec. 9.6)

Does the project require issuance of an NCDOT driveway permit? Yes No

Does the overall project generate 3,000+ vpd during an average weekday? (*Sec. 4.14*) Yes No

Will the project provide outdoor lighting on private property? (*Ch. 11*) Yes No

Will the project require incidental outdoor storage? (*Sec. 6.9*) Yes No

Does a sidewalk exist along the streetside parcel lines? (*Sec. 4.4*) Partial Yes No

Requesting Payment In Lieu of Mitigation based on the TIA? (*Sec. 4.14*) Yes No

Requesting Payment In Lieu of Recreational Open Space Allocation? (*Sec. 7.6*) Yes No

Requesting Payment In Lieu of Sidewalk? (*Sec. 4.9*) Yes No

Brief description of project (*please print clearly*):

PROJECT PLANNING CHECKLIST

Pursuant to LDO Sec. 16.4, all Master Plans that are required for Special Use Permit applications shall be prepared by a licensed design professional with the appropriate statutory authority.
All plans must show or provide the following information where applicable:

Boundary & Topographic Information:

	DONE	N/A
Vicinity Map (16.4.A)		
Boundary Survey & Limits of Construction (16.4.D & P)		
Original / Proposed contours at max. 2-ft intervals (16.4.F)		
Any portion within Watershed Protection Area (16.4.M)		
Corporate Limits & ETJ boundaries, where applicable (16.4.R)		
Phase Lines (16.4.S)		
Floodplain, Floodway, Jurisdictional Wetlands, and/or streams, where applicable (16.4.T)		

Site (Master) Plan Information:

	DONE	N/A
Project Title, property owner(s), developer(s), etc. & date of plan(16.4.B, C, & I)		
Site Calculations (acreage, open space, parking, # units, GFA, etc.) (16.4.E)		
Scale, denoted graphically & numerically (16.4.G)		
Any required Certification Statements (16.4.H)		
Zoning District of project area and adjacent properties (16.4.J)		
Location, dimensions & setbacks of all lots & buildings (16.4.L)		
Location of all parking & loading areas with striping and dimensions (16.4.L)		
Location of all existing & planned streets & alleys with dimensions (16.4.L)		
Location of all existing & planned (over & under) utilities and associated easements (16.4.L)		
Location of all recreational open spaces & other site reservations (16.4.L)		
Location of all required NPDES Best Management Practices (BMPs), if required (16.4.N)		
Cross-sections of proposed streets & alleys (16.4.O)		
Location of, including details and screening, solid waste containment		

Landscape Plan Information:

	DONE	N/A
Location, type & quantity of existing plants/trees and areas to remain natural (16.10.B.6-7)		
Methods & details for protection of Critical Root Zones of existing material (16.10.B.8)		
Location, size & labels of all proposed plants/trees & any other improvements (16.10.B.9,11)		
Planting Table with names, quantity, spacing, size & time of plantings (16.10.B.10)		
Location & details of Irrigation (if applicable) & all planting installation details (16.10.B.12-13)		

****DEPARTMENTAL USE ONLY****

INITIAL PLANNING BOARD DATE: ____ / ____ / 20____

• IF SENT TO COMMITTEE

- ASSIGNED COMMITTEE: _____
- COMMITTEE MEMBERS: _____

- DATE OF INITIAL COMMITTEE MEETING: ____ / ____ / 20____
- DATE OF ADDITIONAL MEETINGS: ____ / ____ / 20____
____ / ____ / 20____

- COMMITTEE RECOMMENDATION? _____

• PLANNING BOARD RECOMMENDATION:

-
- DATE OF RECOMMENDATION: ____ / ____ / 20____
 - VOTE: (_____)
 - ADDITIONAL INFORMATION FOR FILE (CONDITIONS?):

INITIAL CITY COUNCIL DATE: ____ / ____ / 20____

• IF SENT TO COUNCIL COMMITTEE

- COUNCIL COMMITTEE MEMBERS: _____

- DATE OF INITIAL COMMITTEE MEETING: ____ / ____ / 20____
- DATE OF ADDITIONAL MEETINGS: ____ / ____ / 20____
____ / ____ / 20____

- COMMITTEE RECOMMENDATION? _____

• DECISION: _____

- DATE OF DECISION: ____ / ____ / 20____
- VOTE: (_____)
- ADDITIONAL INFORMATION FOR FILE (CONDITIONS?):

