

SMALL TOWN CHARACTER OVERLAY DISTRICT EXEMPT SITE PLAN REVIEW – RESIDENTIAL Town of Apex, North Carolina



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Date Submitted: _____ Application #: _____

Prior to submittal, refer to UDO Section Ordinance 6.3 Small Town Character Overlay District
<http://www.apexnc.org/DocumentCenter/View/553/Small-Town-Character-Overlay-District-PDF?bidId>

Electronic Submittal Requirements (Submit in IDT)

- | | |
|--|--|
| • Small Town Character Residential Application | • Agent Authorization Form (if applicable) |
| • Building Elevations (all affected sides) 11” x 17” | • All documents needed for Hard Copy Submittal below |

Need to register? Use the link below to obtain more information, register, or upload your submittal.
<http://www.apexnc.org/195/Electronic-Plan-Review>

Please note: If you are unable to submit electronically, but have a PDF of the plans, please email it to brenda.johnson@apexnc.org.

Hard Copy Submittal Requirements – Submit to Planning Department

- Existing site layout/conditions
- General site layout including proposed revisions or expansion
- Building elevations (all affected sides)
- Materials list
- Other requirements set by Town Departments (grading plan, tree survey, utility plan, landscape plan, etc.)

Required Submittal Information:

Please provide the information listed below on the proposed Building Elevations and Plot Plan, as indicated. See UDO Sec. 5.1.5 for permitted dimensional standards.

Building Elevations:

- Height of all structures (if proposed detached accessory structure, provide principal structure height)
- Proposed building materials (i.e. siding, trim, window trim, roofing)
- Proposed material colors (i.e. siding, trim, window trim, roofing)

Plot Plan:

- Front, side, and rear setbacks existing
- Front, side, and rear setbacks proposed
- Location of existing and proposed structures (i.e. driveways, sidewalks, patios, etc.)
- Provide the total existing built-upon area (impervious surface) percentage
- Provide the total proposed built-upon area (impervious surface) percentage

SMALL TOWN CHARACTER – RESIDENTIAL APPLICATION

PROJECT INFORMATION

Owner Name:

Project Address:

City:

State:

Zip:

Telephone:

Email:

APPLICANT INFORMATION

Applicant (if different from owner):

Mailing Address:

City:

State:

Zip:

Telephone:

Email:

CONTRACTOR INFORMATION

Contractor/Builder:

Contact Name:

Mailing Address:

City:

State:

Zip:

Telephone:

Email:

#	Yes	No	RESIDENTIAL CHECKLIST ITEMS
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Zoning District:

- | | | | |
|---|--------------------------|--------------------------|--|
| 1 | <input type="checkbox"/> | <input type="checkbox"/> | Is this property located within the Central Business District? |
| 2 | <input type="checkbox"/> | <input type="checkbox"/> | Is this house or structure located within the National Register Historic District? |
| 3 | <input type="checkbox"/> | <input type="checkbox"/> | Is a new home being proposed? |
| 4 | <input type="checkbox"/> | <input type="checkbox"/> | Is this a remodel/change to an existing home? |

If yes, please check the appropriate item(s) below.

a Addition of minor site elements (i.e. HVAC units)

b Expansion of existing home (please explain below):

c Exterior changes to existing structure (please explain below):

d Repair (please explain below):

SMALL TOWN CHARACTER – RESIDENTIAL APPLICATION

Yes No RESIDENTIAL CHECKLIST ITEMS

e Attached or detached garage addition (please explain below):

f Attached or detached accessory structure (please explain below):

5 Are you proposing to demolish structures?

If yes, Planning Staff must approve a demolition permit.

6 Other remodel or change to an existing house (please explain below):

Does this property have a historic preservation easement and/or a rehabilitation agreement (with Capital Area Preservation or other historic preservation group)?

Yes No

If yes, the qualified holder of historic preservation agreements as defined by NCGS Chapter 121, Article 4 will need to sign below:

Qualified Holder Signature _____ Date: _____

Print Name: _____

I/we hereby certify that the following information is true and correct and that the building or land will not be used for any other purpose than indicated in this application.

Applicant Signature: _____ Date: _____

Print Name: _____

I/we understand that Building Permits and/or Electrical, Mechanical, and Plumbing Permits may be required. Contact Building Inspections at 919-249-3418 after this application is approved to file the required applications.

Applicant Signature: _____ Date _____

Print Name: _____

I hereby certify that the foregoing information is true and correct and that the building or land will not be used for any other purpose than indicated in this application.

Owner Signature: _____ Date _____

Print Name: _____

PLANNING DEPARTMENT DETERMINATION

This plan has been reviewed by the Town of Apex Technical Review Committee and to the best of our knowledge and belief, meets the Town of Apex Unified Development Ordinance and does not increase any existing nonconformity. This signature does not constitute a variance from any requirements of an originally approved subdivision or site plan, or any federal, state or local code, law, specification, rule, guideline, or ordinance, such as but not limited to grading and building permits. It is the sole responsibility of the owner/developer, or any of their agents or contract professionals to ensure that this plan meets all the aforementioned requirements.

Planning Department Approval: _____ Date: _____

Print Name: _____

Conditions/Comments/Restrictions:
