



**TOWN OF CLAYTON**  
Planning Department  
111 E. Second St., P.O. Box 879  
Clayton, NC 27528  
Phone: 919-553-5002  
Fax: 919-553-1720

# MAJOR SITE PLAN APPLICATION COVER SHEET

**Name of Project:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

***The following checklist to be completed by applicant:***

- Pre-Application Meeting on: \_\_\_\_\_
- Review fee
- Copy of plan sets in PDF on USB

***11 copies of the following:***

- Completed Application
- Owner's Consent Form
- Adjacent Property Owner's List
- Wastewater Allocation Request Form
- Neighborhood Meeting Notice Letter (1 copy)
- Stormwater Management Statement
- Signed/Sealed Traffic Impact Analysis (if applicable)

***11 copies of the plan set which includes the following:***

- |  |   |
|--|---|
| <input type="checkbox"/> Cover Sheet               | <input type="checkbox"/> Preliminary Grading Plan Sheet     |
| <input type="checkbox"/> Existing Conditions Sheet | <input type="checkbox"/> Preliminary Engineering Plan Sheet |
| <input type="checkbox"/> Lighting Plan Sheet       | <input type="checkbox"/> Signed & Sealed Boundary Survey    |
| <input type="checkbox"/> Site Plan Sheet           | <input type="checkbox"/> Architectural Elevations Sheet     |
| <input type="checkbox"/> Landscaping Plan Sheet    |   |

**Reviewed by:** \_\_\_\_\_



**TOWN OF CLAYTON**  
 Planning Department  
 111 E. Second St., P.O. Box 879  
 Clayton, NC 27528  
 Phone: 919-553-5002  
 Fax: 919-553-1720

# MAJOR SITE PLAN APPLICATION

**Application Fee: \$500.00**

**New Major Site Plan**

**Major Modification to an approved site plan**  
*Permit Modified:* \_\_\_\_\_

## SITE INFORMATION

**Name of Project:** \_\_\_\_\_

**Acreege of Property:** \_\_\_\_\_ **Zoning District:** \_\_\_\_\_

**County Tag #:** \_\_\_\_\_ **NC Pin #:** \_\_\_\_\_

**Address/Location:** \_\_\_\_\_

**Existing Use:** \_\_\_\_\_ **Proposed Use:** \_\_\_\_\_

**Is project within a Planned Development?**  Yes  No **If yes, which:** \_\_\_\_\_

**Is project within an Overlay District?**  Yes  No **If yes, which:** \_\_\_\_\_

**Is a site plan being concurrently submitted?**  Yes  No

## APPLICANT INFORMATION

**Applicant:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

## OFFICE USE ONLY

**Date Received:** \_\_\_\_\_ **Amount Paid:** \_\_\_\_\_ **File Number:** \_\_\_\_\_



- Architectural plans and elevations shall be drawn at an architectural scale of 1" = 3/32', 3/16', 1/8", 1/4', or 3/8'.
- All drawings, except elevations, isometric drawings, and renderings, shall be in two dimensional plan views.
- All text shall be clear and legible.
- Line weight hierarchy on all plans shall be consistent with common drafting standards.
- Multiple sheets shall be consecutively numbered (e.g. Sheet 1 of 4).
- All numerical references shall be rounded up to a maximum of two decimal points.

## PLAN ELEMENTS AND GRAPHIC DATA

*The following items include general and project information. This information is required to be present on all plans, except where otherwise noted.*

Provided		
Yes	N/A	
<input type="checkbox"/>		Consultant Logo Box (name, address, phone number, fax, email, firm and license number)
<input type="checkbox"/>		Project/Application Name
<input type="checkbox"/>		Type of plan
<input type="checkbox"/>		Signature and Professional Seal with date (landscape plans, engineering plans and surveys)
<input type="checkbox"/>		Original/Submittal Date and Revision Date
<input type="checkbox"/>		Sheet Number
<input type="checkbox"/>		Vicinity Map
<input type="checkbox"/>		North Arrow with NC Grid System
<input type="checkbox"/>		Graphic Scale (engineering or architectural graphic and written scale)

## SURVEY

Provided		
Yes	N/A	
<input type="checkbox"/>		A signed and sealed boundary survey ( <b>not more than a year old unless otherwise approved by the Planning Department</b> ) with the bearings and distances of every property line shown. Distances shall be in feet or meters and decimals thereof. The number of decimal places shall be appropriate to the class of survey required. The survey must include any and all easements of record (referenced by Deed Book and Page) and must be prepared by a surveyor registered in the State of North Carolina.

## EXISTING CONDITIONS SHEET

Provided		
Yes	N/A	
<input type="checkbox"/>		The existing topographical conditions of the property with a two foot contour interval.
<input type="checkbox"/>		The existing streets and roadway improvements (medians, landscaping, signage, driveways, etc.) within 100 feet of project boundary.
<input type="checkbox"/>		The existing structures located on the subject property.
<input type="checkbox"/>		The existing structures within 100 feet of project boundary.
<input type="checkbox"/>		The existing utilities (including inverts of pipes, rim elevations, wells and septic tanks, etc.) within 100 feet of project site.

## SITE PLAN

The items listed below are required to be delineated (in tabular format) on the site plan.

Provided		
Yes	N/A	
<input type="checkbox"/>		Site data table
<input type="checkbox"/>		Name of project (AKA names if applicable)
<input type="checkbox"/>		Parcel identification number (and/or Tag number)
<input type="checkbox"/>		Property size (acres and square feet)
<input type="checkbox"/>		Property location (Town limits or ETJ)
<input type="checkbox"/>		Existing zoning district
<input type="checkbox"/>	<input type="checkbox"/>	Proposed zoning district (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	Overlay (if applicable)
<input type="checkbox"/>		Existing use
<input type="checkbox"/>		Proposed use
<input type="checkbox"/>	<input type="checkbox"/>	Number of seats/students/fueling positions (as applicable).
<input type="checkbox"/>	<input type="checkbox"/>	Number of housing units proposed, per housing unit type.
<input type="checkbox"/>		Existing density (number of units per acre)
<input type="checkbox"/>	<input type="checkbox"/>	Proposed density (number of units per acre)
<input type="checkbox"/>		Existing intensity (gross floor area)
<input type="checkbox"/>	<input type="checkbox"/>	Proposed intensity (gross floor area)
<input type="checkbox"/>		Floor area ratio
<input type="checkbox"/>		Building coverage (as percentage of total site)

<b>Provided</b>		
<b>Yes</b>	<b>N/A</b>	
<input type="checkbox"/>		Pervious surface area (square feet and as percentage of total site)
<input type="checkbox"/>	<input type="checkbox"/>	Impervious surface area (square feet and as percentage of total site)
<input type="checkbox"/>	<input type="checkbox"/>	Building height (number of stories and in feet)
<input type="checkbox"/>	<input type="checkbox"/>	Required parking (list requirement i.e. 1 space per 300 SF)
<input type="checkbox"/>	<input type="checkbox"/>	Proposed parking
<input type="checkbox"/>	<input type="checkbox"/>	Required/proposed handicap accessible parking
<input type="checkbox"/>	<input type="checkbox"/>	Required loading space(s)
<input type="checkbox"/>	<input type="checkbox"/>	Provide name of Electric Provider.
<input type="checkbox"/>	<input type="checkbox"/>	Provide name of Water Provider.
<input type="checkbox"/>	<input type="checkbox"/>	Provide name of Sewer Provider.

***Other site plan elements:***

<b>Provided</b>		
<b>Yes</b>	<b>N/A</b>	
<input type="checkbox"/>		Identify adjacent property owners, their parcel ID number, current zoning and present use.
<input type="checkbox"/>	<input type="checkbox"/>	Identify the affected area for amendments to previously approved projects.
<input type="checkbox"/>		Identify the location of lots, buildings and structures with finished floor elevations and applicable setbacks.
<input type="checkbox"/>		Identify existing right of ways.
<input type="checkbox"/>	<input type="checkbox"/>	Identify Watershed Protection Areas.
<input type="checkbox"/>	<input type="checkbox"/>	Identify existing (public and private) easements.
<input type="checkbox"/>	<input type="checkbox"/>	Identify proposed (public and private) easements.
<input type="checkbox"/>	<input type="checkbox"/>	Identify Open Space/Common Areas.
<input type="checkbox"/>		Identify and dimension clear sight triangle at project ingress/egress points.
<input type="checkbox"/>		Identify driveways, curb and gutter, cross section with ROW.
<input type="checkbox"/>	<input type="checkbox"/>	Provide boundaries of Resource Conservation Areas (see UDC Section 155.500).
<input type="checkbox"/>		Provide an off-street parking and loading layout (with details, dimensions and access location). Accessible parking requirements are listed in NCSBC Volume 1C, 1999 edition. Show traffic circulation arrows.
<input type="checkbox"/>	<input type="checkbox"/>	Provide queuing details for drive-up/drive-thru facilities (if applicable).
<input type="checkbox"/>		Provide the locations and dimensions of existing and proposed sidewalks.
<input type="checkbox"/>		Provide the location and details of refuse collection areas.
<input type="checkbox"/>	<input type="checkbox"/>	Provide the location, size and orientation of freestanding signs.

Provided		
Yes	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Identify the location and nature of all recreational facilities and common areas.
<input type="checkbox"/>	<input type="checkbox"/>	Identify alternative modes of transportation including school stops, pedestrian connections, bicycle paths and associated racks.
<input type="checkbox"/>	<input type="checkbox"/>	Identify proposed phasing (phasing lines) of construction.
<input type="checkbox"/>	<input type="checkbox"/>	Cul-de-sacs must be dimensioned.
<input type="checkbox"/>	<input type="checkbox"/>	Identify cluster mailbox unit (CBU) locations and details.

## CONCEPTUAL ENGINEERING PLANS

*Note: Conceptual engineering plans are deemed preliminary in nature. Review and approval of public infrastructure construction plans is a separate process performed by Public Works Engineering Division.*

Provided		
Yes	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Identify proposed streets and roadways (public and private) with dimensions and cross sections.
<input type="checkbox"/>	<input type="checkbox"/>	Identify the curve radii for all internal and external vehicular use areas.
<input type="checkbox"/>	<input type="checkbox"/>	Identify access to the project.
<input type="checkbox"/>	<input type="checkbox"/>	Identify existing conditions and proposed grading plans.
<input type="checkbox"/>	<input type="checkbox"/>	Identify Tree Conservation Areas shown on grading plan.
<input type="checkbox"/>	<input type="checkbox"/>	Show proposed flow of traffic.
<input type="checkbox"/>	<input type="checkbox"/>	Identify proposed traffic control signs and striping.
<input type="checkbox"/>	<input type="checkbox"/>	Identify the proposed water distribution system (including size) with location of fire hydrants and point of connection.
<input type="checkbox"/>	<input type="checkbox"/>	Identify the proposed sanitary sewer collection system (including size) and point of connection. If a municipal sewer connection is not available, please provide documentation from Johnston County Department of Environmental health that the location of septic tank and drain field is acceptable.
<input type="checkbox"/>	<input type="checkbox"/>	Provide preliminary wastewater allocation calculation.
<input type="checkbox"/>	<input type="checkbox"/>	Identify proposed grease traps, if applicable.
<input type="checkbox"/>	<input type="checkbox"/>	Identify backflow prevention, if applicable.
<input type="checkbox"/>	<input type="checkbox"/>	If a pool is present, show drainage plan. Pumping to storm drain is not allowed.
<input type="checkbox"/>	<input type="checkbox"/>	Identify the Utility Plan.
<input type="checkbox"/>	<input type="checkbox"/>	Identify soil erosion control measures including impoundment structures.
<input type="checkbox"/>	<input type="checkbox"/>	Indicate method of slope stabilization measures for all slopes steeper than 2.5:1.

<input type="checkbox"/>	<input type="checkbox"/>	Identify the proposed storm water management system with location of inlets, piping and positive outfall along with typical section and top surface area of storm water retention/detention pond, including soil types, slope, bottom and top elevations, and finish floor elevations.
--------------------------	--------------------------	--

***Fire Rescue (information to be shown on conceptual engineering plans)***

<b>Provided</b>		
<b>Yes</b>	<b>N/A</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Identify fire hydrant distribution (distance of hose lay).
<input type="checkbox"/>	<input type="checkbox"/>	Identify the sprinkler connection locations and size, if applicable.
<input type="checkbox"/>	<input type="checkbox"/>	Identify fire lane designations and circulation around buildings (stripe fire lanes and show minimum stabilized access around all structures).
<input type="checkbox"/>	<input type="checkbox"/>	Identify the emergency evacuation route (access in and out of the property).
<input type="checkbox"/>	<input type="checkbox"/>	Identify fire apparatus turning radius, including streets and cul-de-sacs.
<input type="checkbox"/>	<input type="checkbox"/>	Verify the location of fire hydrants is not interfering with required landscaping (must be 24" clearance of landscaping from bottom of steam fitting).
<input type="checkbox"/>	<input type="checkbox"/>	Identify the Lock Box/Knox Box locations.
<input type="checkbox"/>	<input type="checkbox"/>	Identify placard locations for hazardous materials.

**LANDSCAPE PLAN**

<b>Provided</b>		
<b>Yes</b>	<b>N/A</b>	
<input type="checkbox"/>		Provide a landscape plan identifying the location of all proposed landscaping (must be prepared by a landscape architect registered in North Carolina).
<input type="checkbox"/>		Indicate the location, width and type of all required buffers.
<input type="checkbox"/>		Indicate the location, width and type of landscaping within vehicular use areas.
<input type="checkbox"/>		Indicate the location, width and type of landscaping used to screen drive-thru areas, service areas, loading areas, mechanical equipment and above ground utilities.
<input type="checkbox"/>		Provide a plant list summary table which includes: <ol style="list-style-type: none"> <li>1. A planting key identifying the various planting elements</li> <li>2. The quantity of each type of plant material proposed</li> <li>3. The size, height, caliper and spacing of plant material proposed</li> <li>4. The Botanical and common names of plant material proposed</li> </ol>
<input type="checkbox"/>		Verify/identify clear sight distances at project ingress/egress points.
<input type="checkbox"/>		Provide an irrigation note to read as follows: "All landscaped areas shall be provided with an automatically operated irrigation system that will adequately cover all living plant material, such system shall include a rain sensor." (If irrigation will not be utilized, drought-tolerant species must be used).



Provided		
Yes	N/A	
<input type="checkbox"/>		Provide a landscape maintenance note which states: "All landscaped areas shall be maintained in an attractive and healthy condition. Dead or diseased plantings shall be removed and replaced in a timely fashion".
<input type="checkbox"/>		Identify and list any existing plant material which will be used to satisfy landscape requirements.

**LIGHTING PLAN**

Provided		
Yes	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Conceptual Lighting Plan
<input type="checkbox"/>	<input type="checkbox"/>	Identify the light source and provide a detail of the fixture.
<input type="checkbox"/>		Identify the proposed height of fixtures.

**ARCHITECTURAL ELEVATIONS AND FLOORPLAN**

Provided		
Yes	N/A	
<input type="checkbox"/>		Provide floor plans, elevations, construction materials, finishes and colors, along with type of construction of all buildings per North Carolina Building Code prepared by a professional architect registered in North Carolina.
<input type="checkbox"/>		Indicate the height and number of stories for each structure.
<input type="checkbox"/>		Indicate the location and screening method for all roof mounted structures or equipment.

**APPLICANT AFFIDAVIT**

*I/We, the undersigned, do hereby make application and petition to the Planning Board of the Town of Clayton to approve the subject Major Site Plan. I hereby certify that I have full legal right to request such action and that the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge. I understand this application, related material and all attachments become official records of the Planning Department of the Town of Clayton, North Carolina, and will not be returned.*

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

# NEIGHBORHOOD MEETING INFORMATION

## **Purpose:**

The purpose of the Neighborhood Meeting is to inform the surrounding property owners of the nature of the proposed land use and/or development features, answer questions, respond to concerns, and solicit comments.

## **Meeting Date:**

The meeting must be held at least ten (10) calendar days prior to the Planning Board meeting.

## **Meeting Time & Location:**

The meeting must be held no earlier than 6:00 pm Monday through Friday, and must be held in a location generally accessible to residents within close proximity of the request. The meeting space must be able to comfortably accommodate everyone that receives an invitation.

## **Meeting Notice Mailing requirements:**

1. The applicant must contact all adjacent property owners via first class mailing (see sample letter).
2. The mailing must include all the persons, firms, or corporations owning property within 100 feet and immediately adjacent to the subject property. Where the subject property immediately adjoins a public or private right-of-way, landscape or riparian buffer, commonly-owned private area, public property, or homeowners' association property, then letters of notification shall be sent to adjoining property owners as if they directly abut the subject property.
3. The notice must be mailed at least ten (10) calendar days but not more than twenty-five (25) days prior to the date of the Neighborhood Meeting.

## **Information required to be provided at the Neighborhood Meeting:**

At a minimum, the following materials must be present and discussed at a Neighborhood Meeting:

1. A copy of the project application.
2. A schedule of all upcoming public meetings for the application.
3. A map at a scale that is appropriate to the project and shows neighboring properties and roads.
4. A map, drawing, or other depiction of the proposed land use change or development proposal.

## **Information provided to Planning Department:**

Alert the Planning Department once the date, location, and time of the Neighborhood Meeting are determined. Planning staff may attend the Neighborhood Meeting to answer process/code questions.

Deliver the following items to the Planning Department at least ten (10) calendar days prior to the Planning Board meeting in electronic or hard copy format:

- Adjacent Property Owner's List (aka "mailing list")
- Copy of the letter mailed
- Attendance Roster (aka "sign-in sheet")
- Neighborhood Meeting Summary Form with minutes (see below)



# SAMPLE NEIGHBORHOOD MEETING LETTER

(PLACE ON AGENT'S OR OWNER'S LETTERHEAD)

<Date>

Dear Clayton Area Property Owner:

The purpose of this letter is to notify you of an application filed with the Town of Clayton for a land use change or development proposal involving property adjacent to, or in close proximity to, property shown in your ownership by Johnston County tax records. Per Town of Clayton regulations, a Neighborhood Meeting will be held to provide information to area residents about the proposal. A representative of the applicant will be present to explain their application, answer questions, and solicit comments.

Meeting Date: \_\_\_\_\_ Meeting Time: \_\_\_\_\_

Meeting Location: \_\_\_\_\_

Type of Application: \_\_\_\_\_

Project/proposal property address: \_\_\_\_\_

Description of project/proposal: \_\_\_\_\_

Upcoming public meetings for this application (Planning Board and/or Town Council): \_\_\_\_\_

At a minimum, the following will be available for your inspection at the Neighborhood Meeting:

1. A copy of the project application.
2. A schedule of all upcoming public meetings for the application.
3. A map at a scale that is appropriate to the project and shows neighboring properties and roads.
4. A map, drawing, or other depiction of the proposed land use change or development proposal.

A map is enclosed with this letter showing the location of the property that is subject to this application for land use change and/or development proposal.

If you have any questions prior to or after this meeting, you may contact us at <Insert phone number of applicant> . You may also contact the Planning Department at 919-553-5002.

Sincerely,

<Applicant>

Cc: Town of Clayton Planning Department

# NEIGHBORHOOD MEETING ATTENDANCE ROSTER

**Project:** \_\_\_\_\_

**Application:** \_\_\_\_\_

**Location/Date:** \_\_\_\_\_

	NAME	ADDRESS
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		





**TOWN OF CLAYTON**  
 Planning Department  
 111 E. Second St., P.O. Box 879  
 Clayton, NC 27528  
 Phone: 919-553-5002  
 Fax: 919-553-1720

**OWNER'S CONSENT FORM**

*Consent is required from the property owner(s) if an agent will act on their behalf. A separate form is required from each owner. Consent is valid for one year from date of notary, unless otherwise specified. All fields must be completed.*

**Project Name:** \_\_\_\_\_ **Address or PIN #:** \_\_\_\_\_

**AGENT/APPLICANT INFORMATION:**

\_\_\_\_\_  
 (Name - type, print clearly)

\_\_\_\_\_  
 (Address)

\_\_\_\_\_  
 (City, State, Zip)

I hereby give **CONSENT** to the above referenced agent/applicant to act on my behalf, to submit applications and all required materials and documents, and to attend and represent me at all meetings and public hearings pertaining to the following processes (*list applicable requests*):

\_\_\_\_\_  
 \_\_\_\_\_

Furthermore, I hereby give consent to the party designated above to agree to all terms and conditions which may arise as part of the approval of this application.

I hereby certify that I have authority to execute this consent form as/on behalf of the property owner. I understand that any false, inaccurate or incomplete information provided by me or my agent will result in the denial, revocation or administrative withdrawal of this application, request, approval or permits. I further agree to all terms and conditions which may be imposed as part of the approval of this application.

**OWNER AUTHORIZATION:**

\_\_\_\_\_  
 (Name - type, print clearly)

\_\_\_\_\_  
 (Address)

\_\_\_\_\_  
 (Owner's Signature)

\_\_\_\_\_  
 (City, State, Zip)

**STATE OF** \_\_\_\_\_  
**COUNTY OF** \_\_\_\_\_

Sworn and subscribed before me \_\_\_\_\_, a Notary Public for the above State and County, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**SEAL**

**Notary Public**

**My Commission Expires:** \_\_\_\_\_