

**Durham City/County Planning
Zoning Map Change Application**

Submittal Date:	Case Number: 207-44
Requested Zone(s): (include overlay) RS-10	Existing Zone(s): (include overlay) RR
PIN(s): 0830-04-70-0189	Total Site Area: 0.567
Street Address or Frontage: 1607 ED COOK RD	Jurisdiction: <input type="checkbox"/> County (check one) <input checked="" type="checkbox"/> City <input type="checkbox"/> City and County
Project Name:	

Comprehensive Plan:
(Tier) SUBURBAN (Land Use Designation) 4DU/AC

Summary of Proposed Development (types of uses, number and type of residential units, square footage in non-residential buildings, etc):
SUBDIVIDE EXISTING LOT AND REZONE FROM RR TO RS-10.

Applicant

Contact Name AND Business Name if applicable: BRENT LOCKWOOD			Applicant Signature
Address: 2907 CHAPEL HILL RD			
City: DURHAM	State: NC	Zip Code: 27707	
Phone: 919-215-1912	Fax: 919-882-8808	Email: PROPNC@CLEARWIRE.NET	

Agent (if any)

Contact Name AND Business Name if applicable:			Agent Signature
Address:			
City:	State:	Zip Code:	Email:
Phone:	Fax:		

Property Owner(s) (Attach a separate sheet if more space is necessary)

Name: SAME			Phone:
Address:			Fax:
City:	State:	Zip Code:	Email:
Name:			Phone:
Address:			Fax:
City:	State:	Zip Code:	Email:
Name:			Phone:
Address:			Fax:
City:	State:	Zip Code:	Email:

Contacts	
Development Plan prepared by:	Phone: Email:
Stormwater Impact Analysis prepared by:	Phone: Email:
Traffic Impact Analysis prepared by:	Phone: Email:
Building Design Guidelines/Elevations prepared by:	Phone: Email:
Resource Features Analysis prepared by:	Phone: Email:

Application Checklist

Each item on the following submittal checklist is to be initialed by the Applicant and/or the Agent, indicating that:

- the item is part of the submittal package;
- the item is complete; and
- the information is accurate

A submittal package with items not initialed, or otherwise incomplete or inaccurate, will not be accepted. An application shall be considered to have been accepted for review only after it has been determined to be complete in accordance with Section 3.2.4 of the Unified Development Ordinance, not upon submission to the Planning Department.

I, the undersigned, acknowledge that the application is complete and that all information included is accurate to the best of my knowledge:

Brent Lockwood 10-29-07 BRENT LOCKWOOD
 Signature Date Printed Name

APPLICATION ITEM	APPLICANT/AGENT INITIAL	STAFF ACCEPTANCE
1. Application (signed original plus 2 copies)		
2. Pre- Submittal Conference form		
3. GIS Map of Site		
4. Boundary Map of Area		

5. Ordinance Form with Legal Description		
If submitting with a development plan items 6 - 12 apply:		
6. Development Plan Checklist		
7. 12 Sets of Full Size Plans		
8. Two Legible Plan Reductions (11" X 17")		
9. Owner's Acknowledgement Form for each parcel- must include original signature for all owners of record Forms included: (#)_____		
10. Stormwater Checklist, 2 copies or memo from City of County Stormwater Management		
11. Traffic Impact Analysis, 3 copies or a memo from City Transportation Division		
12. Building Design Guidelines, 3 copies (The Building Design Guidelines Worksheet is required. After the guidelines are approved it is required that they are placed on the cover sheet of the development plan.)		
13. Copy of Annexation Request Transmittal (if applicable; it must be filed prior to the zoning map change submittal)		
14. Land Use Plan Amendment (copy of application)		
15. Neighborhood Meeting Materials (sign- up sheet from the meeting, summary of the issues raised, description of how the proposal addresses the issues, copy of meeting notification, list of those notified, copies of materials distributed)		
16. Filing Fee: \$ 500		