



Chatham County Planning Department
 80-A East Street
 P.O. Box 54, Pittsboro, NC 27312-0054
 Phone: 919-542-8204

MAJOR SUBDIVISION – CONSTRUCTION PLAN

Subdivision Name: Sunset Grove, Phase 2

Property Owner/Applicant:

Surveyor / Engineer:

Name: Chatham Capital, LLC
 Address: 400 Market Street Suite 115
Chapel Hill, NC
 Phone: (W) 919-933-4422
 (H) _____
 (C) 919-244-5312
 Fax: 919-869-2702
 Email: sarah.bpronpnc@gmail.com

Name: Russell Briggs, PE
 Company Name: B&F Consulting, Inc.
 Address: 2805 Tobermory Lane
Raleigh, NC 27606
 Phone: (W) 919-618-0180
 (C) _____
 Fax: n/a
 Email: russell.briggs@bandfconsulting.com

Parcel # (AKPAR): 17425 **P.I.N. #** 9773-50-7432 **Zoning District:** R-1, county
Flood Map # 3710977 200J & 300J **Zone:** X **Watershed District:** Jordan Lake
Existing Access Road (S. R. # and name): Mt. Gilead Church Road (SR 1700)

Phased Development/Development Schedule? YES NO **Phases #** 2

Total Acreage 42.92 Ac. **Total # of Lots** 25 **Min. Lot Size (Acres)** 0.9
Max. Lot Size 2.2 acres **Avg. Lot Size** _____ **# Exempt Lots (over 10 ac.)** _____
0 *Please attached a **DETAILED** Phasing Schedule or Development Schedule (for subdivisions consisting of 50 Lots or More).*

Mixed-Use YES NO **Multi-Family (Townhomes, Apts., etc.)** YES NO

Proposed Number of Lots: Residential 25 Commercial _____ Other 2

If Other, Specify (i.e. recreation) Home Owner Association – SCM, Buffer

Are there historical structures located on the property that may be 50 years or older, i.e. cemetery, fences, chimneys, structures. Yes No

If yes, type of structure(s) _____ **and date and type of contact, i.e. on-site visit, telephone, letter, with Chatham County Historical Association:** _____.

Type of Wastewater Disposal: Individual Septic Community Septic Public System

Type of Water System: Individual Well Community Well(s) Public System

Public Water System Name: North Chatham County Water System

Public Wastewater System Name (ex. Aqua NC): n/a

Type of Road: Private Length (mi.): _____ Public Length (mi.): 0.54

Road Surface: Paved Gravel Width of Road Surface (feet) 20

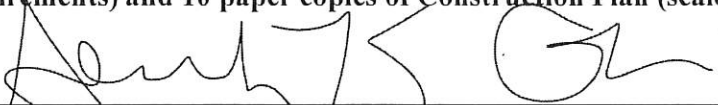
Type and Acreage of Other Facilities (ex. Recreation, Mixed-Use, Commercial, etc.):

PERMITS/APPROVALS REQUIRED: (copies of all required permits shall be included with Construction Plan submittal)

| | | | | |
|--|---|------|------------|---|
| NCDOT ROAD PLAN APPROVAL | YES <input checked="" type="checkbox"/> | DATE | 1/22/2019 | N/A <input type="checkbox"/> |
| NCDOT COMMERCIAL DRIVEWAY PERMIT | YES <input type="checkbox"/> | DATE | _____ | N/A <input checked="" type="checkbox"/> |
| EROSION CONTROL PLAN APPROVAL | YES <input checked="" type="checkbox"/> | DATE | 1/17/2019 | N/A <input type="checkbox"/> |
| STORMWATER PLAN APPROVAL | YES <input checked="" type="checkbox"/> | DATE | 1/17/2019 | N/A <input type="checkbox"/> |
| NCDENR (401 WATER QUALITY CERT) | YES <input checked="" type="checkbox"/> | DATE | 6/29/2018 | N/A <input type="checkbox"/> |
| U.S. ARMY CORPS OF ENGINEERS (404 STREAM IMPACT) | YES <input checked="" type="checkbox"/> | DATE | 6/12/2018 | N/A <input type="checkbox"/> |
| ROAD NAME REQUEST FORM | YES <input checked="" type="checkbox"/> | DATE | 5/2/2018 | N/A <input type="checkbox"/> |
| COUNTY PUBLIC WATER APPROVAL | YES <input checked="" type="checkbox"/> | DATE | 12/11/2018 | N/A <input type="checkbox"/> |
| STATE PUBLIC WATER APPROVAL (NCDENR) | YES <input checked="" type="checkbox"/> | DATE | 1/17/2019 | N/A <input type="checkbox"/> |
| NCDENR DWQ (WASTE WATER TREATMENT PLANT) | YES <input type="checkbox"/> | DATE | _____ | N/A <input checked="" type="checkbox"/> |
| SOIL SCIENTIST REPORT | YES <input checked="" type="checkbox"/> | DATE | 2/08/2019 | N/A <input type="checkbox"/> |

OTHER:

Include one (1) paper copy and (1) electronic copy of all items above (see Digital Document Requirements) and 10 paper copies of Construction Plan (scale not to be more than 200 feet to 1 inch)



2/8/19

Signature of Property Owner/Applicant

Date

For Staff Use Only

Date Received _____ By _____

Date Review Completed _____ Date Applicant Contacted _____

TRC Meeting Date: _____ Construction Plan Approval Date: _____