Conditional Use Application for Planned Unit Development (PUD) Master Plan Review

Date: _____ Fee: _____

Applicant Information

Applicant: _____ Phone: _____

Address: _____

Property Information

GEO Pin Number _____

Property Owner _____

In City Limits _____ Yes _____ No In ETJ _____ Yes _____ No

Voluntary Annexation Requested _____ Yes _____ No

Water Available _____ Yes _____ No Sewer Available _____ Yes _____ No

Land Use Proposed*

Number of Residential Units: Single Family (Detached): _____

Single Family (Attached): _____

Multi-Family/Apartment: _____

Commercial Uses Proposed: Number of Units: _____

Total square footage of all units: _____

* Please attach site plans for all residential and commercial development proposed.

Certification

I/we _____ have reviewed the Unified Development Ordinance (UDO) for the Town of Burgaw and certify that all regulations, requirements, and standards of design have been satisfied as they pertain to this proposed Planned Unit Development (PUD). I understand that the site specific Planned Unit Development Plan submitted pursuant to Section 5-17 of the UDO shall be reviewed pursuant to Section 14-19. I also agree to submit thirteen (13) copies of a Planned Unit Development along with this application.

Applicant Signature: _____ Date: _____

PLEASE RETURN COMPLETED APPLICATION TO TOWN OF BURGAW, PLANNING DEPARTMENT, 109 NORTH WALKER ST., BURGAW, NC 28425.