CITY OF BURLINGTON – PLANNING DEPARTMENT
TECHNICAL REVIEW APPLICATION

Mailing Address: PO Box 1358, Burlington, NC 27216

Office Address: 425 S. Lexington Ave., Burlington, NC 27215

If you have any questions about the plan review process please contact the Planning Department at 336-222-5110

Submit 12 copies of plans to the Planning Department for review.

DEADLINE: SEE TRC MEETING SCHEDULE	The TRC meets in the 1st Floor Conference Room of the Municipal Building.

IMPORTANT:

1. **Only complete submittals will be processed (i.e. completed application, correct number of rolled copies; check for review fee payable to "City of Burlington", etc.)**
2. **Refer to the "Plan Submission Standards" handout for items to include with submittals. (Details and/or information, in addition to that specified, may be required prior to approval.)**

PROJECT SUMMARY:

A. Project Name:

B. Type of Plan: _____ Site Plan / _____ Preliminary Plat / _____ Multifamily Development

C. Street Address and Property Description:

D. Owner/Applicant:

E. Report Comments to:

Address:

Telephone Number: | Fax Number:

E-mail Address:

F. Tax Map / Block / Lot # (s):

G. Total Tract Acreage:

H. Zoning District:

I. Proposed Use: Existing Use:

J. Number of Lots:

K. Multifamily: # units_____ Type: ____Apartments _____Townhouses _____Condominiums

L. Non-residential Developments - Gross Floor Area: Existing: _____ Proposed: _____

M. If rezoning will be requested, please list proposed zoning category: _____(See back please)

Primary Contact (i.e. Surveyor, Engineer, etc.)	***Property Owner/Developer***
Name:_____	***Name:***_____
Address:_____	***Address:***_____
City:_____	***City:***_____
Zip:_____	***Zip:***_____
Daytime Phone #:_____	***Daytime Phone #:***_____

PLAN SUBMISSION GUIDELINES

Plans submitted to the Planning Department that do not include the items on this list will not be reviewed, and will be returned to the contact person.

•	Indicates information that must be provided
/	Indicates information that must be provided; only if applicable

****Office Use Only****

Submittal Date:_____ Review Date:_____

Land Use Designation:_____

Census Tract #:_____

Application Fee:_____(ck. # /cash)

Please supply any use or development conditions that are applicable to the proposed development.

Use Conditions: Uses of the property shall be limited to the following uses as listed in the Table of Permitted Uses, Section 32.9 of the City of Burlington Zoning Ordinance:

1) _____

_____

_____

2) _____

_____

_____

3) _____

_____

_____

4) _____

_____

_____

5) _____

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_____

Development Conditions: Development of the property shall occur in accordance with the following standards and requirements in addition to those specified in the City of Burlington Zoning Ordinance:

1) _____

_____

_____

2) _____

_____

_____

3) _____

_____

_____

4) _____

_____

_____

5) _____

_____

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