PLANNED UNIT DEVELOPMENT DISTRICT

1)	APPLICANT			
	PHONE ()			
	ADDRESS			
	NAME OF AGENT (if any)			
	PHONE ()			
	ADDRESS			
2)	APPLICANT'S INTEREST IN PROPERTY (OWNER, TENANT OTHER)			
3)	PRESENT USE OF PROPERTY			
	PROPOSED USE OF PROPERTY			
4)	PROPERTY LOCATION			
	LEGAL DESCRIPTION			
5)	CURRENT ZONING			
6)	ADJACENT ZONING AND LAND USE:			
	LAND USE ZONING			
NC	DRTH			
SO	OUTH			
EΑ	ST			
WE	EST			
7)	DESCRIPTION OF ANTICIPATED DEVELOPMENT			
8)	ANTICIPATED TIME PERIOD FOR PROJECT COMPLETION			
9)	INDICATE PUD SQUARE FOOTAGES FOR THE FOLLOWING:			
	a. Gross residential density or intensity of use:			
	b. Area set aside for common open spaces:c. Floor area of non-residential use:			
	d. Total ground area covered by buildings:			

10) NUMBER OF HOUSING UNIT	S PROPOSED:
Single Family	Multi-Family
11) THE FOLLOWING MUST BE II	NCLUDED WITH THE APPLICATION:
easements, right-of-w (10 copies) b. Preliminary building pl c. Landscaping plans (10 d. Copies of any propose e. Proof of the establishment of the management at f. Evidence that no lots, development have been restrictive covenants at	nowing the physical layout and design of all streets, vay, lots, blocks, common open space, structures, and use lans, including exterior elevations (10 copies) ocopies) ed easements and restrictive covenants (10 copies) ment and activation of any entity that is to be responsible and maintenance of any common open space (2 copies) parcels, tracts, or dwelling units in the proposed en conveyed or leased prior to the recording of any applicable to such planned development (2 copies)
THE PRELIMINARY AND FINA	•
APPLICANT	AUTHORIZED AGENT
Signature	
Date	 Date
(Applicant or his legal representative	e must be present at the hearing or the matter will be tabled.)

DISCLAIMER: THIS PERMIT WAS REVIEWED AND CONSIDERED BASED UPON THE INFORMATION PRESENTED AT THE TIME OF THE HEARING. IF ANY OF THE INFORMATION PRESENTED FOR CONSIDERATION IN DETERMINING THE GRANTING OF THIS PERMIT IS INCORRECT OR FALSE, THIS PERMIT BECOMES NULL AND VOID.

FOR OFFICIAL USE ONLY			
Case No: Fee Paid: Date Published: Public Hearing Date:	Date Filed: Received by: Date Notices Sent:		
REASON (S) RECOMMENDATION			
PROTEST PETITION FILED? GOVERNING BODY ACTION			
DATE: IF APPROVED, RESOLUTION/ORDINANCE NO:	VOTE:		
EFFECTIVE DATE:			