

Town of Kill Devil Hills Planning and Inspections  
Commercial Site Plan Review Application\*



**Applicant**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Cell: \_\_\_\_\_

**Property Owner**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Cell: \_\_\_\_\_

**Property Location**

Address: \_\_\_\_\_ Lot, Block: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Pin#: \_\_\_\_\_

Zoning District:  Commercial  LI-1  LI-2  OIR  
Total Lot Size: \_\_\_\_\_ Sq. Ft. Disturbed Area: \_\_\_\_\_ Sq. Ft.

**Contractor**

Company Name: \_\_\_\_\_ License Number: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Town Privilege License Number: \_\_\_\_\_

**Construction Information**

Type of Construction: \_\_\_\_\_  
 Assembly  Business  Educational  Factory/Industrial  High Hazard  
 Institutional  Mercantile  Residential  Storage  Utility/Misc.  
 New Construction  Addition  Repair/Replace  Remodel  Other: \_\_\_\_\_

*Square Footage Proposed:*

Interior Space: \_\_\_\_\_ Sq. Ft. Covered Deck(s): \_\_\_\_\_ Sq. Ft. Storage: \_\_\_\_\_ Sq. Ft.  
Garage: \_\_\_\_\_ Sq. Ft. # of Bedrooms: \_\_\_\_\_ # of Open Deck(s): \_\_\_\_\_  
Proposed Square Footage: \_\_\_\_\_ + Existing Square Footage: \_\_\_\_\_ = \_\_\_\_\_ Total Sq. Ft.  
% Impervious Coverage: \_\_\_\_\_ + % Pervious Coverage: \_\_\_\_\_ = \_\_\_\_\_ Total % Coverage  
# of Parking Spaces: Existing: \_\_\_\_\_ Proposed: \_\_\_\_\_ Total: \_\_\_\_\_  
Septic Tank Permit #: \_\_\_\_\_ Construction Type: \_\_\_\_\_

Estimated Construction Cost (including labor and materials): \_\_\_\_\_

**Flood Information**

Flood Zone:  VE  AE  X Base Flood Elevation: \_\_\_\_\_  
Proposed First Floor Elevation: \_\_\_\_\_ Sq. Ft Below Base Flood Elevation: \_\_\_\_\_

*\*This form is designed as a guide for Commercial Site Plan Review.  
Additional plans and information will be required prior to building permits.*

## Project Description

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### **Required Site Plan Information Checklist:**

- Permit Application (Completed)
- Site Plan Including the following
  - Submittal Requirements:
    - Vicinity Map
    - 15 Copies of Site Plan & Building Plan Elevations – Front, Side, and Rear
    - Tentative Health Department Approval
    - Site Plan Development Review Fee Paid in Full
  - Existing Conditions:
    - Boundary of Entire Lot
    - Width and Location of Existing Right of Ways
    - Nature, Purpose, Locations, and Size of Existing Easements
    - Iron Pins and Concrete Monuments
    - Scale (1" = 50" Minimum)
    - North Arrow
    - Streets Including Width of Pavement
    - All Underground Utilities, Gas/Propane Below or Above Grade
    - Dare Co. Register of Deeds Map Book/Subdivision Ref.
    - Street Address
    - Present Recorded Owner, Developer, Engineer contacts
    - Adjacent Property Owners, Adj. Use & Zone
    - Corp. of Engineers Report / Wetland Study
    - NFIP Flood Zone (ref: Elevation Datum (NAVD 1988))
    - Minimum, Lot Size indicated
  - Proposed Improvements:
    - Zoning Use Compliance/Setbacks labeled
    - Landscaping Plan / Buffers / Screening (per section 153.073)
    - Lighting Plan - photometric showing point output (section 153.074)
    - Sedimentation & Erosion Control Plan including details
    - Disturbed Areas delineated & areas calculated
    - Location of Sidewalks on the Croatan Highway and Curbs
    - Location of Sewer Facilities and Drain field
    - Proposed Building Type, # of Floors and dimensions, floor area ratio, Height
    - Existing and Finished Grades of Entire Site
    - Storm Water Management Plan including calculations
    - Total Units and Density per Acre (Multi-Family) or floor area ratio (in OIR)
    - Lot Size and Lot Coverage Calculation
    - Utility Plan indicating location & sizes of proposed improvements
    - Water Service Sizing Checklist
    - Layout, Size and Number of Parking Spaces including handicap w/ setbacks (Each Space Numbered)
    - Fire Lane and Driveways
    - Loading Zone (Commercial Sites)
    - Mail Delivery Cluster Sites (Multi-Family)

- Proposed First Floor Elevation
- Dumpster Pad Location
- Proposed Sign Location
- Sight triangle shown
- Commercial Building Plans showing architectural compliance
- Plans to N.C.D.O.T. ( if required)
- NC Engineer/Land Surveyor Seal on Site Plan

\*\*\* The items listed in the Site Plan portion of the above checklist represent information that must be indicated on any site plan submitted for review by the Kill Devil Hills Planning Department, Planning Board, and Board of Commissioners. All of the above required documents shall be submitted on or before the 3rd Tuesday of each month. Upon completion of review, the Planning Board shall transmit its recommendations to the Board of Commissioners. The Board of Commissioners shall review site plans on the second Monday of each month.

Signature of Applicant: \_\_\_\_\_ (Date) \_\_\_\_\_