

# Pender County Planning and Community Development

**Planning Division**  
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## SITE DEVELOPMENT APPLICATION

| THIS SECTION FOR OFFICE USE <span style="float: right;">Inv. 00000113</span>                 |  |   |                                 |                                      |                       |
|--|--|---|---------------------------------|--------------------------------------|-----------------------|
| Date: 3-22-16  | Permit Number: 207-2016  | Permit Fee: 250.00  | Receipt Number:                 |                                      |                       |
| *Zoning Approval ONLY: YES / <input checked="" type="radio"/> NO                             |  | Final Zoning Compliance Approved: YES / <input checked="" type="radio"/> NO / N/A |                                 |                                      |                       |
| Type of Site Development Plan  | <input checked="" type="checkbox"/> Major  | <input type="checkbox"/> Minor  | <input type="checkbox"/> Up-Fit | <input type="checkbox"/> Name Change |                       |
| Change of Current Use:   | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No   | <input type="checkbox"/> Does Not Apply   |                                 | Previous Use: Vacant                 |                       |
| SECTION 1: GENERAL INFORMATION   |  |   |                                 |                                      |                       |
| Applicant's Name:  | CARROLL RAYNOR   | Owner's Name:   | STACY HOLLIS FAMILY LTD PT      |                                      |                       |
| Applicant's Address:   | 462 HOLLY SHELTER ROAD   | Owner's Address:  | 922 HWY 17 SOUTH                |                                      |                       |
| City, State, & Zip   | JACKSONVILLE, NC 28540   | City, State, & Zip  | SURF CITY, NC 28445             |                                      |                       |
| Phone Number:  | (910) 346-2047   | Phone Number:   |                                 |                                      |                       |
| Legal relationship of applicant to land owner:   | LEASEE   |   |                                 |                                      |                       |
| SECTION 2: PROJECT INFORMATION   |  |   |                                 |                                      |                       |
| PIN (Property Id #):   | 4226-97-4215-0000  | Total property acreage:   | 2.39                            |                                      |                       |
| Zoning :   | GB   | Acreage to be disturbed:  | 2.25                            |                                      |                       |
| Directions to Site:  | HEADING NORTH ON NC 17 FROM HAMPSTEAD, SITE IS APPROX. 2.32 MILES ON THE RIGHT<br>PAST THE INTERSECTION OF NC 17 & NC 210. |   |                                 |                                      |                       |
| Lot Size: 2.39   | Sq Ft of Building: 0 HEATED SQ FT  | Building Height: +/- 12'  |                                 |                                      |                       |
| Setbacks   | Front : 25'  | Side : 10'  | Rear: 10'                       |                                      |                       |
| NAICS Code/Use:  | 662920 Materials recovery facilities (MRF) 562219 - Other Nonhazardous Waste Treatment + Disposal                          |   |                                 |                                      |                       |
| Business Name:   | FOUR POINTS RECYCLING  |   |                                 |                                      |                       |
| Describe activities to be undertaken on project site:  | DEBRIS RECYCLING FACILITY  |   |                                 |                                      |                       |
| Ownership:<br><input checked="" type="checkbox"/> Private<br><input type="checkbox"/> Public | Number of Employees:   | 3   | Number of Members:              | N/A                                  | Seating Capacity: N/A |

\* If the applicant is not the owner of the property, a notarized letter from the property owner may be required.

\*Zoning approval is for the use being proposed ONLY, other department approvals may be required i.e. Fire Marshal, Environmental Health, Permitting, etc...

**SECTION 3: CONDITIONS OF PERMIT (STAFF ONLY) Check all that apply**

|                                     |   |  |                              |
|-------------------------------------|---|--|------------------------------|
| <input checked="" type="checkbox"/> | Subject to compliance with all local, state and federal regulations               |  |                              |
| <input checked="" type="checkbox"/> | Compliance with the site plan and application submitted for this permit           |  |                              |
| <input checked="" type="checkbox"/> | Compliance with setbacks  |  |                              |
| <input type="checkbox"/>            | Located within the Special Flood Hazard Area (SFHA):                              | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes |
| <input type="checkbox"/>            | SFHA Zone: AE, A, VE, AEFW (circle one)   |  |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Flood-proofing Certification Required                    |  |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Elevation certificate required                           |  |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> No-Rise Certification Required                           |  |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Electrical and Mechanical to be Elevated                 |  |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Hydrostatic Openings Required                            |  |                              |
| <input type="checkbox"/>            | Foundation survey required  |  |                              |
| <input type="checkbox"/>            | Pender County Environmental Health Approval                                       |  |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Septic Permit  | NA                                     |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Well Permit  | NA                                     |                              |
| <input type="checkbox"/>            | Community Water System Approval   |  |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Pender County Utilities (PCU) Water                      | NA                                     |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Private Water  | NA                                     |                              |
| <input type="checkbox"/>            | Community Wastewater Approval   |  |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Pender County Utilities (PCU) Sewer                      | NA                                     |                              |
| <input type="checkbox"/>            | <input type="checkbox"/> Private Wastewater                                       | NA                                     |                              |
| <input checked="" type="checkbox"/> | Sediment and Erosion Control Permit (if required)                                 |  |                              |
| <input checked="" type="checkbox"/> | Storm Water Permit (if required)  |  |                              |
| <input checked="" type="checkbox"/> | NC DOT Driveway Permit <i>in progress as of 3-22-16</i>                           |  |                              |
| <input checked="" type="checkbox"/> | Army Corp Engineers Wetland Permit  |  |                              |
| <input type="checkbox"/>            | CAMA permit required  |  |                              |
| <input checked="" type="checkbox"/> | Landscape, buffer, parking compliance required                                    |  |                              |
| <input checked="" type="checkbox"/> | Compliance w/ Special Use Permit (Case Number : <i>94-2015</i> if already issued) |  |                              |
| <input type="checkbox"/>            | Variance approval   |  |                              |
| <input checked="" type="checkbox"/> | Sign Permit   |  |                              |
| <input type="checkbox"/>            | Additional Use Plot Plan  |  |                              |
| <input type="checkbox"/>            | Additional Conditions (staff or TRC):   |  |                              |
| <input type="checkbox"/>            | Additional Conditions (staff or TRC):   |  |                              |
| <input type="checkbox"/>            | Additional Conditions (staff or TRC):   |  |                              |

**SECTION 4: ADDITIONAL COMMENTS**

- No Parking required
- Type A Buffer on Front
- Type B on all other sides

**SECTION 5: SIGNATURES**

|                                      |  |       |                |
|--------------------------------------|--|-------|----------------|
| Applicant:                           | <i>Carol Roy</i>                                   | Date: | <i>3/22/16</i> |
| Owner:                               | <i>Stacy Hillis Family QTD PTNRP / Helen Evans</i> | Date: | <i>3/22/16</i> |
| Planning Staff:                      |  | Date: |                |
| Permit Technician:                   |  | Date: |                |
| Final Zoning Compliance Approved By: |  | Date: |                |