APPLICATION FOR MASTER DEVELOPMENT PLAN

THIS SECTION FOR OFFICE USE			
Application No.	MDP 436-2016	Date	12-8-16
Application Fee	$ 620.00	Receipt No.	Inv. 284
Pre-Application Conference	7-14-16	Hearing Date	1-4-17

SECTION 1: APPLICANT INFORMATION

Applicant's Name:	HEADWATERS PROPERTIES, LLC	Owner's Name:	WASHINGTON ACRES INC. By CHARLES BUSBY, ATTORNEY IN FACT
Applicant's Address:	1131-B MILITARY CUTOFF RD	Owner's Address:	1464 US-17
City, State, & Zip	WILMINGTON, NC 28405	City, State, & Zip	HAMPSTEAD, NC 28443
Phone Number:	910.256.2211	Phone Number:	910.270.8880
Email Address:	jason@swinassociates.com	Email Address:	charles@baileybusby.com

Legal relationship of applicant to land owner: OWNER | DEVELOPER

SECTION 2: PROJECT INFORMATION

Type of Master Development Plan	☐ Residential RP, PD, RM MH District	☐ Commercial GB, OI, IT, GI District	☑ Mixed Use PD	☐ Exempt

Property Identification Number (PIN):	3282-74-3515-0000 3282-74-6231-0000 3282-74-8862-0000 3283-74-1001-0000	Total property acreage:	± 24.26AC
Zoning Classification:	PD	Acreage to be disturbed:	± 24.00AC
Project Address:	ALONG HWY 17 BTWN HUGHES RD & DOGFIELD DR.		
Description of Project Location:	UNDEVELOPED PROPERTY		
Describe activities to be undertaken on project site:	MIXED USE COMMERCIAL DEVELOPMENT INCLUDING ± 75,000SF GROCERY & IN-LINE RETAIL & 5 OUTPARCELS FOR RETAIL/RESTAURANT FULL PROPOSED USES IN PROJECT NARRATIVE		

SECTION 3: SIGNATURES

Applicant's Signature	JASON SWINN	Date:	12/5/16
Owner's Signature (PARCEL 3282-74-3515-000) HEADWATERS PROPERTIES		Date:	12/5/16

OWNER'S SIGNATURE
PARCELS 3282-74-6231-0000
3282-74-8862-0000
LANDWILLO DEVELOPMENT COMPANY | _____ DATE: _____

OWNER SIGNATURE
PARCEL 3282-74-1001-0000
ATTORNEY REP: FOR HUGHES ESTATE
Washington Acres, INC. _____ DATE: 12/5/16
CHARLES T. BUSBY

APPLICATION FOR MASTER DEVELOPMENT PLAN

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Pre-Application Conference	7-14-16	Hearing Date	1-4-17

SECTION 1: APPLICANT INFORMATION

Applicant's Name:	HEADWATERS PROPERTIES, LLC	Owner's Name:	LANWILLOW DEVELOPMENT COMPANY
Applicant's Address:	1131-B MILITARY CUTOFF RD	Owner's Address:	PO BOX 1080
City, State, & Zip	WILMINGTON, NC 28405	City, State, & Zip	WILMINGTON, NC 28402
Phone Number:	910.256.2211	Phone Number:	910.763-9891
Email Address:	jason@swinnsociates.com	Email Address:	lwj@mwglaw.com

Legal relationship of applicant to land owner: OWNER / DEVELOPER

SECTION 2: PROJECT INFORMATION

Type of Master Development Plan	☐ Residential RP, PD, RM MH District	☐ Commercial GB, OI, IT, GI District	☒ Mixed Use PD	☐ Exempt

Property Identification Number (PIN):	3282-74-3515-0000 3282-74-6231-0000 3282-74-8862-0000 3282-74-1001-0000	Total property acreage:	±24.2 AC
Zoning Classification:	PD	Acreage to be disturbed:	±24.00 AC
Project Address:	ALONG HWY 17 BTWN HUGHES RD & DOBBED DR.		
Description of Project Location:	UNDEVELOPED PROPERTY		
Describe activities to be undertaken on project site:	MIXED USE COMMERCIAL DEVELOPMENT INCLUDING ±75,200 SF GROCERY & IN-LINE RETAIL & 5 OUTPARCELS FOR RETAIL / RESTAURANT FULL PROPOSED USES IN PROJECT NARRATIVE		

SECTION 3: SIGNATURES

Applicant's Signature	Jason Swinn	Date:	12/5/16
Owner's Signature PARCEL 3282-74-8862-000 HEADWATERS PROPERTIES		Date:	12/5/16

OWNER'S SIGNATURE
PARCELS 3282-74-6231-0000
3282-74-8862-0000
LANWILLO DEVELOPMENT COMPANY DATE: 12/5/16

OWNER SIGNATURE
PARCEL 3282-74-1001-0000
ATTORNEY REP: FOR HUGHES ESTATE
Washington Acres, INC DATE:

NOTICE TO APPLICANT

1. Applicant or agent authorized in writing must attend the public hearing.
2. Once the public hearing has been advertised, the case will be heard unless the applicant withdraws the application or unless the Planning Board or other authorized person agrees to table or delay the hearing.
3. All fees are non-refundable
4. A complete application packet must be submitted prior to the deadline in order to be placed on the next Planning Board Agenda

Office Use Only

☒	**MDP Fees:** (*$500.00 plus $10/acre for the first 100 acres $5/acre thereafter)*	**Total Fee Calculation: $** 620.00

Attachments Included with Application: (Please include # of copies)

CD /other digital version	☒ Y ☐ N	Plan Sets	# of large 1	# of 11X17 15	Other documents/Reports	☒ Y ☐ N

Payment Method:	**Cash :** ☐ $_____	**Credit Card:** ☐ Master Card ☐ Visa	**Check:** ☒ Check # _____

Application received by:	PCK Only	Date: 12-8-16
Application completeness approved by:	PCK Only	Date: 12-8-16
Date scheduled for public hearing:	1-4-17 - PB	