

**TOWN OF CHARLOTTE
PLANNING COMMISSION
SITE PLAN REVIEW**

Name of Applicant(s): _____ **Name of Property Owner(s) if different from Applicant** _____

Address: _____ **Address:** _____

Phone Number: _____ **Phone Number:** _____

Signature of property owner(s) authorizing application if different than applicant : _____

Parcel ID No. : _____ **Zoning District(s):** _____

Size of parcel: _____ **acres** **Sketch Plan Review Date:** _____

Previous subdivision of parcel?: Name _____ **Date** _____ **Map #** _____

Previous Site Plan Approval?: Date _____ **Map #** _____

Location of proposed project: _____

Description of proposed project: _____

Proposed number of parking spaces _____ **Location of parking/loading areas** _____

Existing and proposed means of access to site: _____

Are there existing or proposed easements? _____ **Existing or proposed trails, paths, walkways?** _____

How will sewage disposal be addressed: _____

How will water be addressed: _____

How will drainage be addressed? _____

Is lighting proposed? _____ **Is signage proposed?** _____ **Is landscaping proposed?** _____

Are there historic structures on the site? _____ **What state or federal permits are required?** _____

***Applicant must address the standards enumerated in the Charlotte Land Use Regulations found at Section 5.5 (D) and attach as supplements to this application any plans, engineered designs, or specifications required.**

Official Use Only:

Application # _____

Received:

Fee Paid _____

Date of Hearing _____