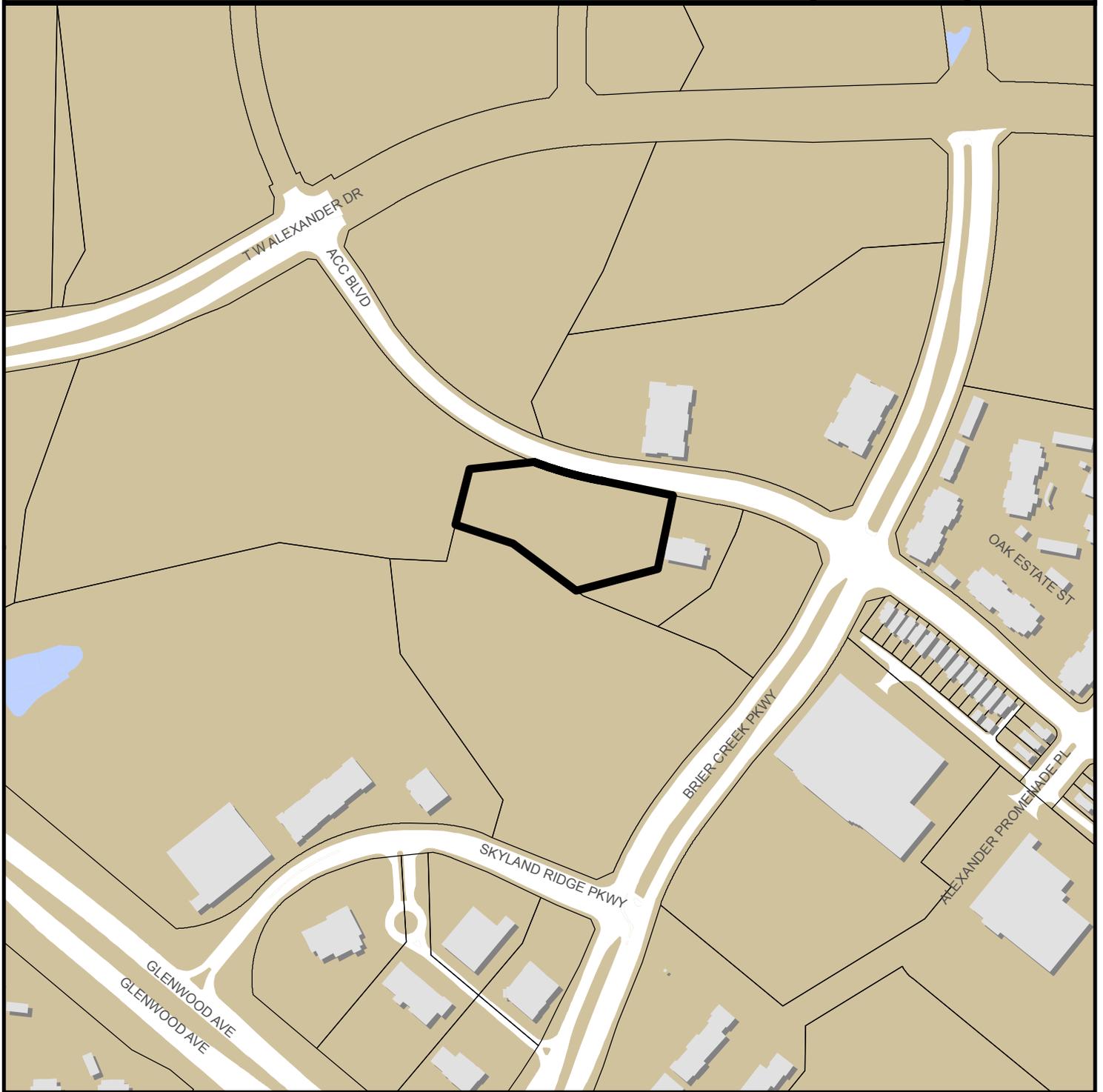


TRIANGLE SURGICAL CENTER ADDITION SR-28-2016



0 300 600 Feet

Zoning: **CX-7-PL-CU**

CAC: **Northwest**

Drainage Basin: **Little Briar**

Acreage: **2.32**

Lots sq. ft.: **6,238**

Planner: **Justin Rametta**

Phone: **(919) 996-265**

Applicant: **Grubb Healthcare**

Phone: **704-362-5000**



Administrative Site Review Application (for UDO Districts only)



**DEVELOPMENT
SERVICES
DEPARTMENT**

Development Services Customer Service Center | 1 Exchange Plaza, Suite 400 | Raleigh, NC 27601 | 919-996-2495 | eFax 919-996-1831
Litchford Satellite Office | 8320 - 130 Litchford Road | Raleigh, NC 27601 | 919-996-4200

When submitting plans, please check the appropriate building type and include the Plan Checklist document. *SP-28-16*

BUILDING TYPE		FOR OFFICE USE ONLY
<input type="checkbox"/> Detached <input type="checkbox"/> Attached <input type="checkbox"/> Apartment <input type="checkbox"/> Townhouse	<input checked="" type="checkbox"/> General <input type="checkbox"/> Mixed Use <input type="checkbox"/> Open Lot	Transaction Number <i>409702</i> Assigned Project Coordinator <i>Shank</i> Assigned Team Leader <i>Parretto</i>
Has your project previously been through the Due Diligence process? If yes, provide the transaction #		
GENERAL INFORMATION		
Development Name Triangle Surgical Center Addition		
Zoning District CX-7-PL-CU		
Proposed Use Medical Office		
Property Address(es) 7921 Acc Blvd		
Wake County Property Identification Number(s) for each parcel to which these guidelines will apply: 0768488788		
P.I.N. Recorded Deed	P.I.N. Recorded Deed	P.I.N. Recorded Deed
What is your project type? <input type="checkbox"/> Apartment <input type="checkbox"/> Elderly Facilities <input type="checkbox"/> Hospitals <input type="checkbox"/> Hotels/Motels <input checked="" type="checkbox"/> Office <input type="checkbox"/> Mixed Residential <input type="checkbox"/> Non-Residential Condo <input type="checkbox"/> School <input type="checkbox"/> Shopping Center <input type="checkbox"/> Townhouse <input type="checkbox"/> Banks <input type="checkbox"/> Single Family <input type="checkbox"/> Telecommunication Tower <input type="checkbox"/> Religious Institutions <input type="checkbox"/> Residential Condo <input type="checkbox"/> Retail <input type="checkbox"/> Cottage Court <input type="checkbox"/> Industrial Building <input type="checkbox"/> Other: If other, please describe: _____		
WORK SCOPE	Per City Code Section 10.2.8.D.1, summarize the project work scope. Building addition, no changes in existing parking lot.	
DESIGN ADJUSTMENT OR ADMIN ALTERNATE	Per City Code Chapter 8, summarize if your project requires either a design adjustment, or Section 10 - Alternate Administrative AE Design adjustment is requested for Acc Blvd standard section to remain as is and be consistent with adjacent property.	
CLIENT/DEVELOPER/OWNER	Company GHTD Brier Creek, LLC	
	Name (s) Dan Schumacher	
	Address 4601 Park Road, Suite 450, Charlotte, NC 28209	
Phone 704-562-1131	Email dschumacher@grubbproperties.com	Fax
CONSULTANT (Contact Person for Plans)	Company John A. Edwards and Company	
	Name (s) Jon Callahan	
	Address 333 Wade Ave, Raleigh, NC 27605	

DEVELOPMENT TYPE & SITE DATA TABLE (Applicable to all developments)

Zoning Information	Building Information
Zoning District(s) CX-7-PL-CU	Proposed building use(s) Medical Office
If more than one district, provide the acreage of each:	Existing Building(s) sq. ft. gross 11,400
Overlay District	Proposed Building(s) sq. ft. gross 6,238
Total Site Acres Inside City Limits <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 2.32 acres	Total sq. ft. gross (existing & proposed) 17,638
Off street parking: Required 45 Provided 48	Proposed height of building(s) 27' Stories 1
COA (Certificate of Appropriateness) case #	FAR (floor area ratio percentage) 100%
BOA (Board of Adjustment) case # A-	Building Lot Coverage percentage (site plans only) 17%
CUD (Conditional Use District) case # Z-44-15	Height of 1 st Floor
Stormwater Information	
Existing Impervious Surface 0.89 ac acres/square feet	Flood Hazard Area <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Proposed Impervious Surface 0.14 ac acres/square feet	If Yes, please provide: Alluvial Soils Flood Study #348 FEMA Map Panel #
Neuse River Buffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Wetlands <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

FOR RESIDENTIAL DEVELOPMENTS

1. Total # Of Apartment, Condominium or Residential Units	5. Bedroom Units: 1br 2br 3br 4br or more
2. Total # Of Congregate Care Or Life Care Dwelling Units	6. Infill Development 2.2.7
3. Total Number of Hotel Units	7. Open Space (only) or Amenity
4. Overall Total # Of Dwelling Units (1-6 Above)	8. Is your project a cluster unit development? <input type="checkbox"/> Yes <input type="checkbox"/> No

SIGNATURE BLOCK (Applicable to all developments)

In filing this plan as the property owner(s), I/we do hereby agree and firmly bind ourselves, my/our heirs, executors, administrators, successors and assigns jointly and severally to construct all improvements and make all dedications as shown on this proposed development plan as approved by the City.

I hereby designate John A Edwards and Company to serve as my agent regarding this application, to receive and respond to administrative comments, to resubmit plans on my behalf and to represent me in any public meeting regarding this application.

I/we have read, acknowledge and affirm that this project is conforming to all application requirements applicable with the proposed development use.

Signed  DANIEL SCHUMACHER Date 4/13/16

Signed _____ Date _____

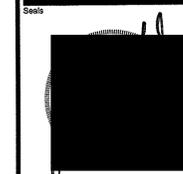
TO BE COMPLETED BY APPLICANT			TO BE COMPLETED BY CITY STAFF		
General Requirements	YES	N/A	YES	NO	N/A
1. Filing Fee for Plan Review – Payments may be made by cash, Visa, Master Card or check made payable to: City of Raleigh (No fee for Infill recombination)	<input checked="" type="checkbox"/>				
2. <u>Site Review</u> completed and signed by the property owner	<input checked="" type="checkbox"/>				
3. Client must complete and print page 1 and 2 of the <u>Site Review</u> to the plan cover sheet (not applicable for infill recombination)	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
4. I have referenced the <u>Site Review</u> and by using this as a guide, it will ensure that I receive a complete and thorough first review by the City of Raleigh	<input checked="" type="checkbox"/>				
5. Provide the following plan sheets:	<input checked="" type="checkbox"/>				
a) Cover sheet: includes general notes, owner's name, contact's name, telephone number, mailing address and email address	<input checked="" type="checkbox"/>				
b) Existing Conditions Sheet	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
c) Proposed Site Plan	<input checked="" type="checkbox"/>				
d) Proposed Grading and Stormwater Plan; Approach to Stormwater	<input checked="" type="checkbox"/>				
e) Proposed Utility Plan, including Fire	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
f) Proposed Tree Conservation Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
g) Proposed Landscaping Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
h) Building elevations that show maximum height of buildings to be removed	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
i) Transportation Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
6. Ten (10) sets of proposed plans to engineering scale (1" = 20', 1" =100', etc.), and date of preparation. <u>For re-submittals – include all revision dates</u>	<input checked="" type="checkbox"/>				
7. Minimum plan size 18"x24" not to exceed 36"x42"	<input checked="" type="checkbox"/>				
8. A vicinity map no smaller/less than 1"=500' and no larger than 1"=1000' to the inch, showing the position of the plan with its relation to surrounding streets and properties, and oriented in the same direction as the preliminary plan	<input checked="" type="checkbox"/>				
9. Include sheet index and legend defining all symbols with true north arrow, with north being at the top of the map	<input checked="" type="checkbox"/>				
10. Digital copy of only the plan and elevations. Label the CD with the plan name, case file number, and indicate how many times the plan has been resubmitted for review	<input checked="" type="checkbox"/>				
11. Wake County School Form, if dwelling units are proposed	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
12. Preliminary stormwater quantity and quality summary and calculations package	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
13. For secondary tree conservation areas, include two (2) copies of the tree cover report completed by a certified arborist, North Carolina licensed landscape architect, or North Carolina registered forester	<input type="checkbox"/>	<input checked="" type="checkbox"/>			



JOHN A. EDWARDS & COMPANY
Consulting Engineers
and Land Surveyors

NC License F-0289
333 Wade Ave., Raleigh, N.C. 27605
Phone: (919) 828-4428
Fax: (919) 828-4711
E-mail: info@jaeco.com

www.jaeco.com



**TRIANGLE SURGICAL
CENTER
EXPANSION**

7921 ACC BLVD

GHTD BRIER CREEK, LLC
4601 PARK ROAD, SUITE 450
CHARLOTTE, NC 28209

Approvals

- LEGEND**
- EIP EXISTING IRON PIPE
 - R/W RIGHT OF WAY
 - HC Handicapped
 - DI - Drop Inlet
 - CO - Sanitary Sewer Cleanout
 - FH - Fire Hydrant
 - WV - Water Valve
 - CB - Catch Basin
 - Power Pole
 - Power MH
 - Traffic Signal Box
 - Water Meter
 - Sanitary Sewer Manhole
 - Storm Drainage Manhole

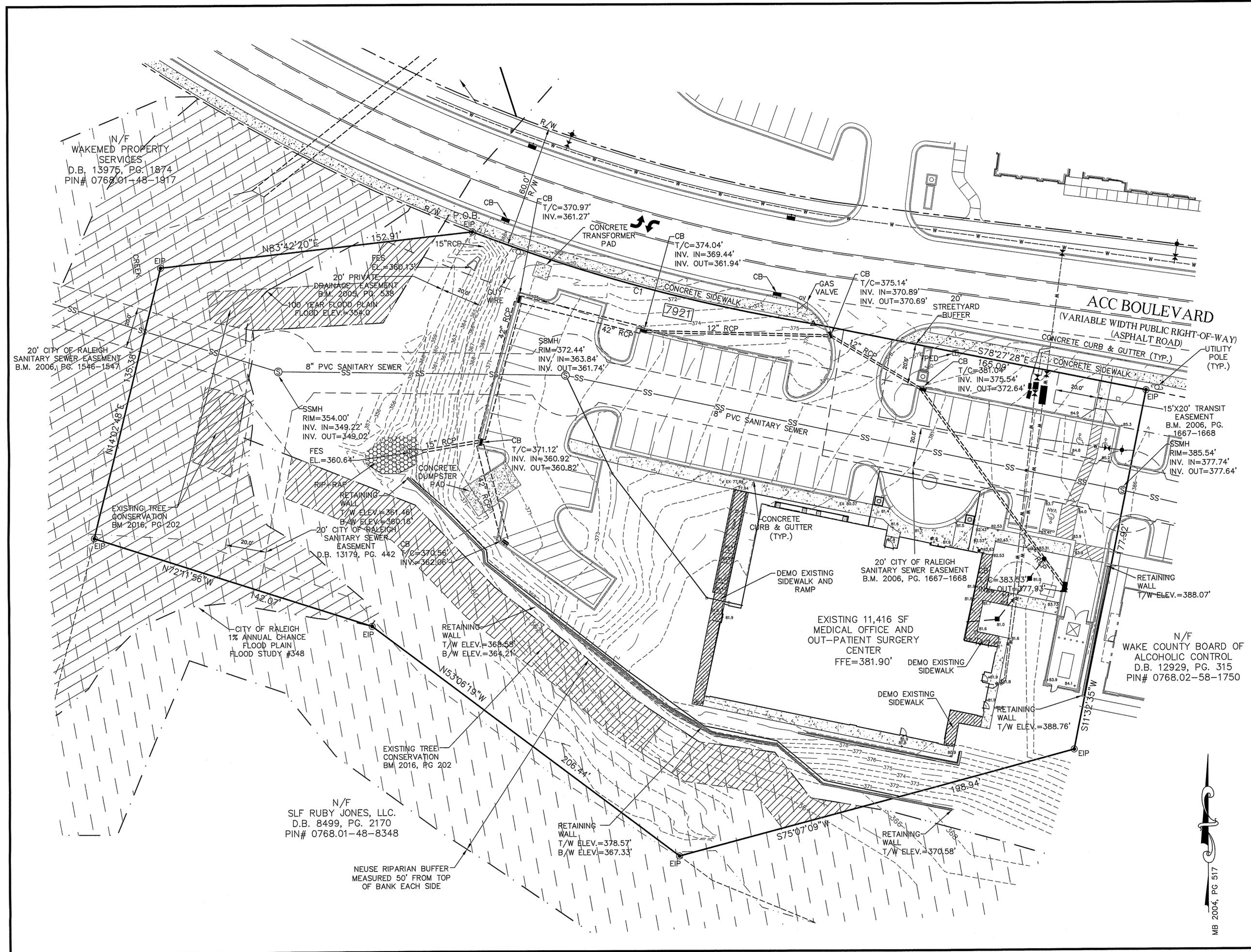
**EXISTING CONDITIONS
AND DEMO PLAN**

Revisions

Number	Description	Date

Drawing Scale 1" = 20'
Drawn By JRC
Checked By JRC
Date Issued 4/15/16

EX-1



MB 2004, PG 517

N/F
WAKEMED PROPERTY
SERVICES
D.B. 13975, PG. 1874
PIN# 0768.01-48-1917

20' CITY OF RALEIGH
SANITARY SEWER EASEMENT
B.M. 2006, PG. 1546-1547

EXISTING TREE
CONSERVATION
BM 2016, PG. 202

CITY OF RALEIGH
1% ANNUAL CHANCE
FLOOD PLAIN
FLOOD STUDY #348

N/F
SLF RUBY JONES, LLC.
D.B. 8499, PG. 2170
PIN# 0768.01-48-8348

NEUSE RIPARIAN BUFFER
MEASURED 50' FROM TOP
OF BANK EACH SIDE

RETAINING
WALL
T/W ELEV.=378.57
B/W ELEV.=367.33

RETAINING
WALL
T/W ELEV.=370.58'

N/F
WAKE COUNTY BOARD OF
ALCOHOLIC CONTROL
D.B. 12929, PG. 315
PIN# 0768.02-58-1750

20' CITY OF RALEIGH
SANITARY SEWER EASEMENT
B.M. 2006, PG. 1667-1668

15'X20' TRANSIT
EASEMENT
B.M. 2006, PG.
1667-1668

SSMH
RIM=354.00'
INV. IN=349.22'
INV. OUT=349.02'

FES
EL.=360.64'

RETAINING
WALL
T/W ELEV.=361.46'
B/W ELEV.=360.16'

20' CITY OF RALEIGH
SANITARY SEWER
EASEMENT
D.B. 13179, PG. 442
T/C=370.56'
INV.=362.06'

RETAINING
WALL
T/W ELEV.=368.58'
B/W ELEV.=364.21'

EXISTING TREE
CONSERVATION
BM 2016, PG 202

CONCRETE
DUMPSTER
PAD

T/C=371.12'
INV. IN=360.92'
INV. OUT=360.82'

SSMH/
RIM=372.44'
INV. IN=363.84'
INV. OUT=361.74'

CONCRETE
TRANSFORMER
PAD

T/C=374.04'
INV. IN=369.44'
INV. OUT=361.94'

CONCRETE
CURB & GUTTER
(TYP.)

20' CITY OF RALEIGH
SANITARY SEWER EASEMENT
B.M. 2006, PG. 1667-1668

CONCRETE
CURB & GUTTER
(TYP.)

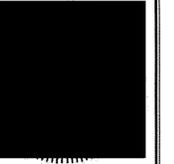
RETAINING
WALL
T/W ELEV.=388.76'

ACC BOULEVARD
(VARIABLE WIDTH PUBLIC RIGHT-OF-WAY)
(ASPHALT ROAD)

CONCRETE CURB & GUTTER (TYP.)
CONCRETE SIDEWALK

REUSE OF DOCUMENT

This document is the property of DHM Design Corp. The ideas and design incorporated on this document is an instrument of professional service and shall not be used for any other project without written authorization of DHM Design Corp.



Triangle Surgical Center Expansion

7921 ACC Blvd.
Raleigh, North Carolina
Wake County

PROJECT NUMBER: DATE
16xxx.00 04.20.2016

DESIGNED:
DRAWN:
CHECKED:

REVISIONS:
- - - - -
- - - - -
- - - - -

JOB DESCRIPTION:
Plot Plan
Submittal

SHEET TITLE:

PLANTING
PLAN

SHEET NUMBER:

L101

SHEET OF

