

Development Plan Review Application

Town of Rolesville Planning Department | PO Box 250 | Rolesville, NC 27571 | 919-554-6517 | planning@rolesville.nc.gov

Planning Department Home Page: [Official Town Webpage](#)

PROJECT & PLAN INFORMATION:

<input type="checkbox"/> Preliminary Subdivision Plat (PSP)	<input type="checkbox"/> Site Development Plan (SDP)
<input type="checkbox"/> Construction Infrastructure Drawings (CID)	<input type="checkbox"/> Final Subdivision Plat (FSP)
Submittal #: <input type="checkbox"/> Original <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd <input type="checkbox"/> Other _____ OR <input type="checkbox"/> Revision to Previously Approved (_____)	
If a resubmittal, revisions to the plan must be clouded and a comment response letter must be provided for the resubmittal to be complete.	
Legal Description (Book of Maps if platted, or Register of Deeds Bk/Pg if not):	
Proposed Project Name:	Site Address:
PIN(s) or REID(s):	Site Area (in acres):
Associated Previous Case Number(s):	Current Use(s): Vacant
Zoning District(s):	Zoning and/or Watershed Overlay(s):
Proposed # of New Lots (Residential or Nonresidential):	Proposed Residential Dwelling Units; Proposed Residential Density:
Summary Description of Proposed Use / Project:	

APPLICATION REQUIREMENTS - the following documents by the submittal deadline to be considered complete and ready for review. Additional supporting documents may be requested by the TRC Staff case by case.

<input type="checkbox"/> Completed Application & Specific application checklist .	<input type="checkbox"/> Sketch/Pre-Submittal meeting notes (if applicable).
<input type="checkbox"/> PDF's (Flattened, < than 100MB) of any/all documents	<input type="checkbox"/> Any approved/recorded Special Use Permits, Variances, etc.
<input type="checkbox"/> FIRM panel, USGS, and Soil Survey Maps, as applicable.	<input type="checkbox"/> Traffic Impact Analysis, ITE Traffic Generation Letter, or Letter/Email from Planning staff confirming one is <u>not</u> required
<i>Note: INVOICE issued for the Application fee payment during the completeness check or following application review.</i>	

Financially Responsible Party

(*that who receives and will pay Invoices for the Actual Cost Consultant Review Fees*)

Mailing Address _____ City/State/Zip _____
Phone _____ Email _____

Property Owner (PRINT) _____ (if more than 1 use separate sheet)

Property Owner (Signature) _____

Mailing Address _____ City/State/Zip _____
Phone _____ Email _____

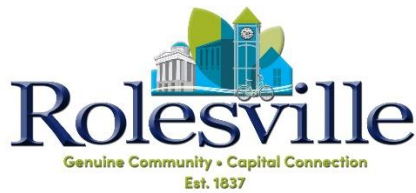
Applicant / Engineer / Architect / Attorney / Agents

Name: _____ Phone: _____

Email: _____

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____



**Town of Rolesville Planning Department
Property Owner Consent & Authorization Form
planning@rolesvillenc.gov**

Consent is required from the property owner(s) or legal representative. Unless otherwise specified, consent is valid for one year from the date of application.

Please provide a separate form for each parcel number. For properties with multiple owners, an individual form must be completed for each owner. (A husband and wife may both sign and submit one form.)

Project/ Subdivision Name: _____
Site Address: _____
Parcel ID: _____ **Deed Reference:** _____

Financially Responsible Party *This field is required.

Name: _____ Signature: _____
(type or print clearly)
Company Name: _____ Title: _____
Mailing Address: _____ City/State/Zip: _____
Phone: _____ Email: _____

☐ **Applicant** ☐ **Owner** ☐ **P.O.A.** ☐ **Agent** ☐ **Legal Representative**
Check all that apply.

1). Name: _____ Signature: _____
(type or print clearly)
Mailing Address: _____ City/State/Zip: _____
Phone: _____ Email: _____
2). Name: _____ Signature: _____
(type or print clearly) (spouse if applicable)
Mailing Address: _____ City/State/Zip: _____
Phone: _____ Email: _____

By signing the above, I swear and affirm that I am the owner(s) or authorized representative as shown in the records of Wake County, North Carolina, which is the subject of this application. I further affirm that I am fully aware of the Town's application, fees, and procedural requirements, and I consent to this Application. I authorize the person(s) listed below to submit this Application and serve as the representative and point of contact for this Application.