

Project Overview

#1004526

Project Title: LOT 2, BELLE ARBOR

Jurisdiction: City of Fayetteville

Application Type: 5.3) Special Use Plan Review

State: NC

Workflow: Staff Review

County: Cumberland

Notice Regarding Special Use Permit Procedural Process

Special Use Permit

Dear Applicants,

Thank you for applying for a Special Use Permit with the City of Fayetteville. Due to legislative changes, the procedural process for Special Use Permits have changed:

1. Special Use Permits are now considered Evidentiary Hearings. With an Evidentiary Hearing, it is incumbent upon the applicant to present evidence that supports the application. This evidence is required both in writing and verbally.
2. Since the written evidence comes mainly from the application, the eight (8) Findings of Fact are essential. The answers must be complete and accurate.
3. Applicants are required to make, at minimum, an oral presentation to the City Council that addresses the eight (8) Findings of Facts. The applicant has the option of doing a visual presentation as well, but this is not required.
4. Lastly, Special Use Permits no longer have to be reviewed by the Zoning Commission and will proceed directly to the City Council. The deadline dates for Special Use Permits have changed.

Expiration - Special Use Permit (SUP)

30-2.C.7.d.7.a.2 - Unless specified otherwise by the City Council, a Special Use Permit shall automatically expire if a Building Permit for the development authorized by the Special Use Permit is not obtained within one year after the date of issuance of the Special Use Permit, or if the development authorized by the Special Use Permit is discontinued and not resumed for a period of one year.

Again, thank you for your application. If you have any additional questions, please contact the Planning & Zoning Division at 910-433-1612 to speak with a Professional Planner.

If you would like a copy of the above text, you can [download a copy here](#).

Please enter your full name in the space below to confirm your acknowledgement of the above statement.

Enter Your Full Name Here: LORIS EPELR

Project Location

Project Address or PIN: 105 ARBOR VIEW CT
(0427471706000)

Zip Code: 28305

GIS Verified Data

Property Owner: Parcel

- 105 ARBOR VIEW CT: SHINELIGHT PROPERTIES, LLC

Acreage: Parcel

- 105 ARBOR VIEW CT: 0.28

Zoning District: Zoning District

- 105 ARBOR VIEW CT: SF-15

Subdivision Name:

Fire District:

Airport Overlay District:

Hospital Overlay District:

Coliseum Tourism District:

Cape Fear District:

Downtown Historic District:

Haymount Historic District:

Floodway:

100 Year Flood: <100YearFlood>

500 Year Flood: <500YearFlood>

Watershed:

Written Description of Special Use

Is the proposed project for a cell tower?: No

A) Provide a written description of the proposed special use, including summary of existing uses and the proposed use/activity in detail. Also include hours and days of operation, number of employees, number of clients, etc.:
OWNER WISHED TO CONSTRUCT A DUPLEX IN SR-15 ZONING

B) Please provide a description of the Zoning District designations and existing uses on adjacent properties, including across the street.:

ALL ADJOINING PROPERTIES ARE ZONED SF-15.

ALL ADJOINING PROPERTIES ARE VACANT EXCEPT FOR ONE SINGLE STORY HOME TO THE WEST.

Special Use Justification. Answer all questions on this and the following pages (upload additional sheets as needed).

Indicate how the special use complies with all applicable use-specific standards in the City Code of Ordinances.:

THE PROPOSED SITE COMPLIES COMPLETELY WITH 30-4.C2.AND 30-5.G.

Describe how the special use is compatible with the character and uses permitted in the zoning district(s) of surrounding lands.:

THE CONSTRUCTION OF THE STRUCTURE WILL BE VERY MUCH IN KEEPING WITH THE SURROUNDING HOMES. THE ENTRANCES TO THE UNITS FACE A PRIVATE STREET SO FROM MORGANTON ROAD IT WILL APPEAR TO BE A SINGLE FAMILY UNIT.

ACROSS MORGANTON ROAD THERE ARE TWO DEVELOPMENTS OF MULTI-FAMILY UNITS.

Indicate how the special use avoids significant adverse impact on surrounding lands regarding service delivery, parking and loading, odors, noise, glare, and vibration.:

THESE ARE RESIDENTIAL UNITS AND WILL HAVE NO NEGATIVE IMPACT ON ADJOINING PROPERTIES.

Demonstrate how the special use is configured to minimize adverse effects, including visual impacts of the proposed use on adjacent lands.:

THIS NEIGHBORHOOD WAS ORIGINALLY RECORDED FOR FOUR LOTS. THE CURRENT OWNER HAS REDUCED THAT TO TWO LOTS AND PLANS TO BUILD HER PRIMARY RESIDENCE ON THE REMAINING LOT.

AGAIN, THE STRUCTURE WILL FACE THE PRIVATE DRIVE AND APPEAR TO BE ONE HOME FROM MORGANTON ROAD.

Explain how the special use avoids significant deterioration of water and air resources, wildlife habitat, scenic resources, and other natural resources.:

NONE OF THOSE ARE PRESENT ON THIS SITE.

Indicate how the special use maintains safe ingress and egress onto the site and safe road conditions around the site.:

BY USE OF THE PRIVATE STREET.

Demonstrate how the special use allows for the protection of property values and the ability of neighboring lands to develop the uses permitted in the zoning district.:

The structure will blend nicely with surrounding properties which are already developed.

The special use complies with all other relevant City, State, and Federal laws and regulations.:

It does comply with all other regulations.

Primary Contact Information

Contractor's NC ID#:

Project Owner

NIKKI CREECY
SHINELIGHT PROPERTIES LLC
203 ROWAN STREET
FAYETTEVILLE, NC 28301
P:910-257-6406
LEPLER@LKANDA.COM

Project Contact - Agent/Representative

LORIEPLER
Larry King & Assoc.
1333 Morganton Road, Fayetteville
Fayetteville, NC 28305
P:9104834300
LEPLER@LKANDA.COM

As an unlicensed contractor, I am aware that I cannot enter into a contract that the total amount of the project exceeds \$30,000. :

NC State General Contractor's License Number:

NC State Mechanical Contractor's #1 License Number:
NC State Mechanical Contractor's #2 License Number:
NC State Mechanical Contractor's #3 License Number:
NC State Electrical Contractor #1 License Number:
NC State Electrical Contractor #2 License Number:
NC State Electrical Contractor #3 License Number:
NC State Plumbing Contractor #1 License Number:
NC State Plumbing Contractor #2 License Number:

Indicate which of the following project contacts should be included on this project: