

Preliminary Land Use Service (PLUS)

Delaware State Planning Coordination

122 William Penn Street • Dover, DE 19901 • Phone: 302-739-3090 • Fax: 302-739-5661

Purpose of PLUS - -The PLUS process is intended to provide consolidated State comments regarding the proposed project. The Applicant is encouraged to submit the application during the concept stages of planning as this process often offers recommendations for changes to the plan. The application should be submitted after the pre-application meeting with the local jurisdiction but before formal application is made.

Please complete this PLUS application in its entirety. All questions must be answered. If a question is unknown at this time or not applicable, please explain. Unanswered questions on this form could lead to delays in scheduling your review. This form will enable the state staff to review the project before the scheduled meeting and to have beneficial information available for the applicant and/or developer at the time of review. If you need assistance or clarification, please call the State Planning Office at (302) 739-3090.

PLUS Number (to be completed by OSPC): _____
Investment Level Per Strategies for State Policies and Spending (to be determined by OSPC): _____

1. Project Title/Name:

2. Location (please be specific):

3. Parcel Identification #:

4. County or Local Jurisdiction Name: where project is located:

5. If contiguous to a municipality, are you seeking annexation:

6. Owner's Name:

Address:

City: State: Zip:

Phone: Fax: Email:

7. Equitable Owner/Developer (This Person is required to attend the PLUS meeting):

Address:

City: State: Zip:

Phone: Fax: Email:

8. Project Designer/Engineer:

Address:

City: State: Zip:

Phone: Fax: Email:

9. Please Designate a Contact Person, including phone number, for this Project:

| | |
|--|--|
| Information Regarding Site: | |
| 10. Type of Review: <input type="checkbox"/> Rezoning, if not in compliance with certified comprehensive plan <input type="checkbox"/> Site Plan Review <input type="checkbox"/> Subdivision | |
| 11. Brief Explanation of Project being reviewed: If this property has been the subject of a previous LUPA or PLUS review, please provide the name(s) and date(s) of those applications. Webb Property 2004-05-05 | |
| 12. Area of Project (Acres +/-): | Number of Residential Units: Commercial square footage: |
| 13. Present Zoning: | 14. Proposed Zoning: |
| 15. Present Use: | 16. Proposed Use: |
| 17. Water: <input type="checkbox"/> Central (Community system) <input type="checkbox"/> Individual On-Site <input type="checkbox"/> Public (Utility) Service Provider Name: Will a new public well be located on the site? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 18. Wastewater: <input type="checkbox"/> Central (Community system) <input type="checkbox"/> Individual On-Site <input type="checkbox"/> Public (Utility) Service Provider Name: Will a new community wastewater system be located on this site? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 19. If residential, describe style and market segment you plan to target (Example- Age restricted): | |
| 20. Environmental impacts: How many forested acres are presently on-site? How many forested acres will be removed? To your knowledge, are there any wetlands, as defined by the U.S. Army Corps of Engineers or the Department of Natural Resources and Environmental Control, on the site? <input type="checkbox"/> Yes <input type="checkbox"/> No Are the wetlands: <input type="checkbox"/> Tidal Acres: <input type="checkbox"/> Non-tidal Acres: If "Yes", have the wetlands been delineated? <input type="checkbox"/> Yes <input type="checkbox"/> No Has the Army Corps of Engineers signed off on the delineation? <input type="checkbox"/> Yes <input type="checkbox"/> No Will the wetlands be directly impacted and/or do you anticipate the need for wetland permits? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", describe the impacts: How close do you anticipate ground disturbance to wetlands, streams, wells, or waterbodies? _____ | |
| 21. Does this activity encroach on or impact any tax ditch, public ditch, or private ditch (ditch that directs water off-site)? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 22. List the proposed method(s) of stormwater management for the site: | |
| 23. Is open space proposed? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," how much? Acres: What is the intended use of the open space (for example, active recreation, passive recreation, stormwater management, wildlife habitat, historical or archeological protection)? | |
| 24. Are you considering dedicating any land for community use (e.g., police, fire, school)? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

25. Please estimate How many vehicle trips will this project generate on an average weekday? A trip is a vehicle entering or exiting. If traffic is seasonal, assume peak season:

What percentage of those trips will be trucks, excluding vans and pick-up trucks?

26. Will the project connect to state maintained roads? Yes No

27. Please list any locations where this project physically could be connected to existing or future development on adjacent lands and indicate your willingness to discuss making these connections.

28. Are there existing sidewalks? Yes No; bike paths Yes No
Are there proposed sidewalks? Yes No; bike paths Yes

Is there an opportunity to connect to a larger bike, pedestrian, or transit network? Yes No

29. To your knowledge, is this site in the vicinity of any known historic/cultural resources or sites? Yes No

Has this site been evaluated for historic and/or cultural resources? Yes No

Would you be open to a site evaluation by the State Historic Preservation Office? Yes No

30. To promote an accurate review of your parcel's features, would you permit a State agency site visit? Yes No
Person to contact to arrange visit: _____ phone number: _____

31. Are any federal permits, licensing, or funding anticipated? Yes No

I hereby certify that the information on this application is complete, true and correct, to the best of my knowledge.

Signature of property owner

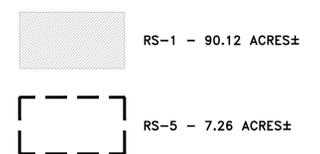
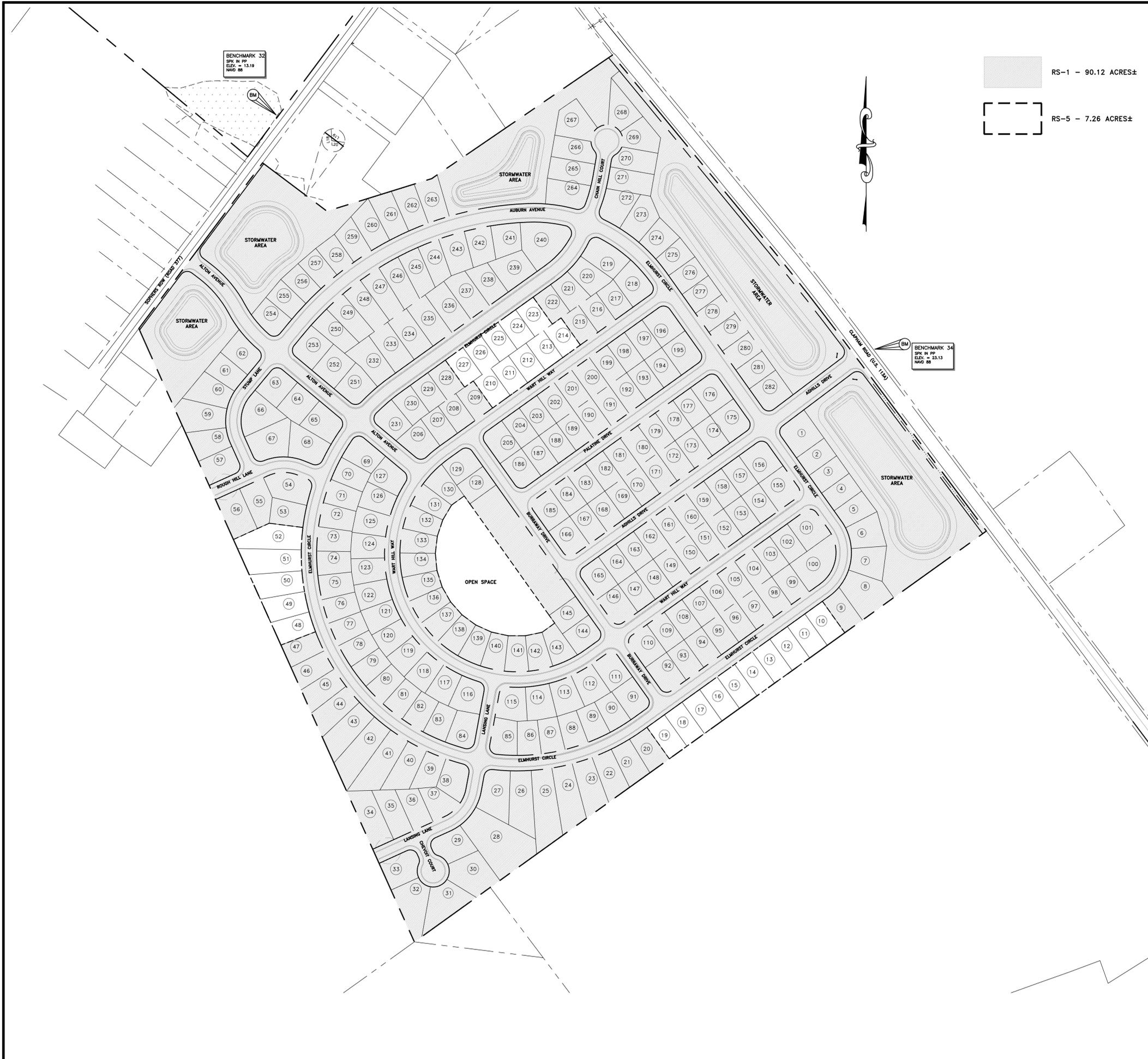
Date

Signature of Person completing form
(If different than property owner)

Date

Signed application must be received before application is scheduled for PLUS review.

This form should be returned to the Office of State Planning electronically at PLUS@state.de.us along with an electronic copy of any site plans and development plans for this site. Site Plans, drawings, and location maps should be submitted as image files (JPEG, GIF, TIF, etc.) or as PDF files. GIS data sets and CAD drawings may also be submitted. If electronic copy of the plan is not available, contact the Office of State Planning at (302) 739-3090 for further instructions. A signed copy should be forwarded to the Office of State Planning, 122 William Penn Street, Dover, DE 19901. Thank you for this input. Your request will be researched thoroughly. Please be sure to note the contact person so we may schedule your request in a timely manner.



DATA COLUMN

LAND USE (PROPOSED) (INSIDE THE GROWTH ZONE)
 RESIDENTIAL LOTS 60.04 AC.±
 OPEN SPACE 18.16 AC.±
 RIGHT-OF-WAY 19.15 AC.±
 TOTAL SITE 97.38 AC.±

TAX MAP NUMBERS:
 SM-00-113.18-01-01.00 THRU SM-00-113.18-01-99.00
 SM-00-113.18-02-01.00 THRU SM-00-113.18-02-99.00
 SM-00-113.18-03-01.00 THRU SM-00-113.18-03-43.00
 SM-00-122.01-02-01.00 THRU SM-00-122.01-02-47.00

EXISTING ZONING
 RS-1: 97.38 AC. ±

PROPOSED ZONING
 RS-1: 90.12 AC. ±
 RS-5: 7.26 AC.±

TOTAL: 97.38 AC. ±
 DENSITY: 2.90 UNITS PER ACRE
 PROPOSED BUILDING HEIGHT 35' MAX.

MINIMUM ZONING REQUIREMENTS
 SINGLE FAMILY 10 FT.
 SIDE YARD 25 FT.
 FRONT YARD 25 FT.
 REAR YARD 25 FT.
 *WIDTH OF LOT 70 FT.
 DEPTH OF LOT 100 FT.
 MINIMUM LOT AREA 7500 SQ. FT.
 PROPOSED MINIMUM LOT AREA 7500 SQ. FT.
 MAXIMUM LOT AREA 30081 SQ. FT.
 AVERAGE LOT AREA 9274 SQ. FT.
 MAXIMUM PERCENTAGE IMPERVIOUS COVER 30%
 MAXIMUM SLOPE 15%
 MINIMUM SLOPE 3%
 TOTAL AVERAGE WITHIN WOODLAND PRESERVATION 0%

TOTAL UNITS
 SINGLE FAMILY LOTS: 282 UNITS
 TOPOGRAPHIC BOUNDARY SURVEY PERFORMED BY DAVIS, BOWEN, & FRIEDEL, INC. OF SALISBURY MARYLAND.
 NAD 83
 NAVD 88
 NO. OF MONUMENTS FOUND.....9
 NO. OF MONUMENTS PROPOSED...139
 PROPOSED CONSTRUCTION:
 WOOD CONSTRUCTION / CONCRETE BLOCK

UTILITIES:
 PUBLIC SEWER SYSTEMS (KENT COUNTY)
 PUBLIC WATER SYSTEMS (ARTESIAN WATER)
 SUBDIVISION STREETS CONSTRUCTED WITHIN THE LIMITS OF THE RIGHT OF WAY DEDICATED TO THE PUBLIC USE SHOWN ON THIS PLAN ARE TO BE MAINTAINED BY THE STATE OF DELAWARE FOLLOWING THE COMPLETION OF THE STREETS BY THE DEVELOPER TO THE SATISFACTION OF THE STATE. THE STATE ASSUMES NO MAINTENANCE RESPONSIBILITIES WITHIN THE DEDICATED STREET RIGHT OF WAY UNTIL THE STREETS HAVE BEEN ACCEPTED BY THE STATE.

THE PROPERTY IS NOT IMPACTED BY THE 100 FLOOD PLAIN BASED ON MAPS 10001C0261J & 10001C0262J DATED JULY 7, 2014.
 THE PROPERTY AS SHOWN HEREON DOES CONTAIN STATE OR FEDERALLY REGULATED SECTION 10 WETLANDS. BASED ON HWI AND DNREC WETLAND MAPS.
 NO EXISTING STRUCTURES LOCATED ON SITE.

OWNER:
 CANTERBURY LAND DEVELOPMENT
 1685 SOUTH STATE STREET
 DOVER, DE 19901

PREPARED BY:
 DAVIS, BOWEN & FRIEDEL
 23 NORTH WALNUT STREET
 MILFORD, DELAWARE 19963

DAVIS, BOWEN & FRIEDEL, INC.
 ARCHITECTS, ENGINEERS & SURVEYORS
 SALISBURY, MARYLAND (410) 543-9091
 MILFORD, DELAWARE (302) 424-1441



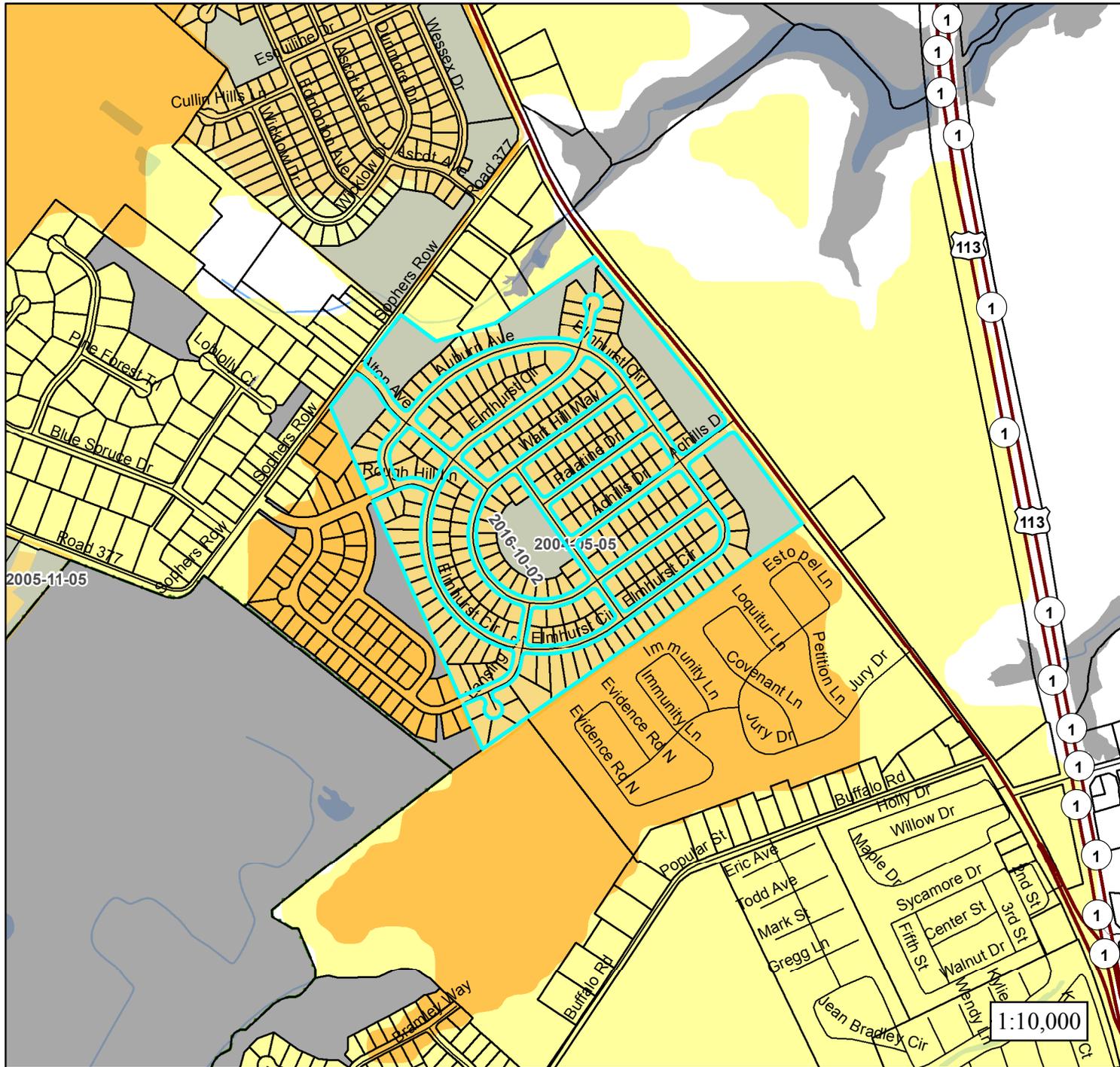
REZONING PLAN

HATTERAS HILLS
 SOUTH MURDERKILL HUNDRED
 KENT COUNTY, DELAWARE

Date: SEPTEMBER, 2016
 Scale: 1" = 150'
 Dwn.By: DJR
 Proj.No.: 465C009
 Dwg.No.:



Preliminary Land Use Service (PLUS)

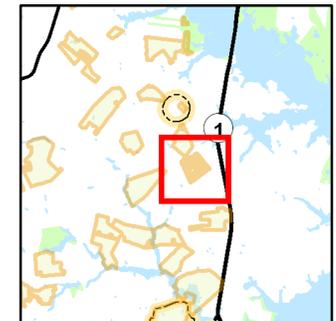


Hatteras Hills 2016-10-02

Legend

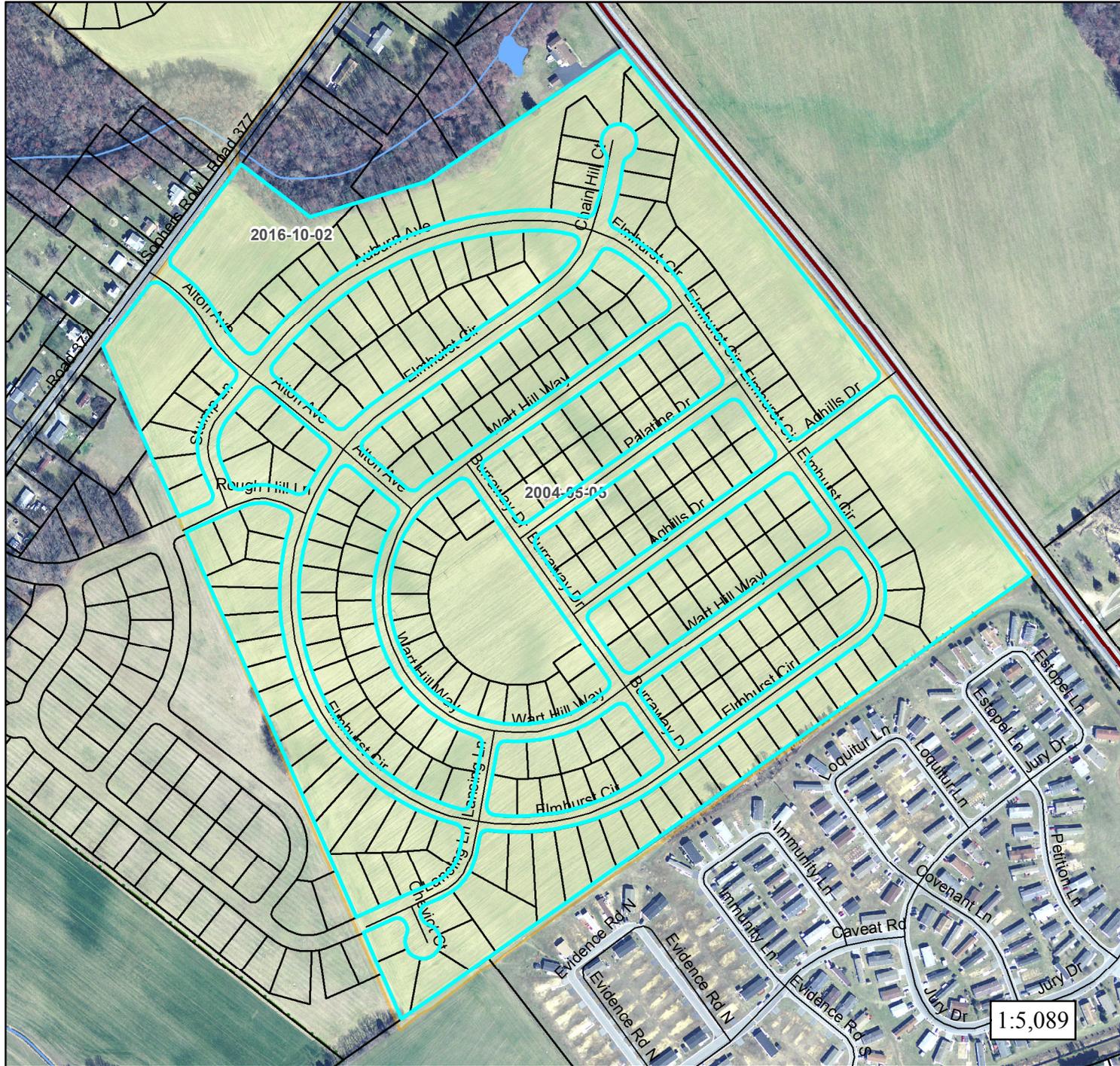
- PLUS Project Areas
- 2015 State Strategies**
- Level 1
- Level 2
- Level 3
- Level 4
- Out of Play

Location Map



Mapping provided by the Delaware
Office of State Planning Coordination
www.stateplanning.delaware.gov

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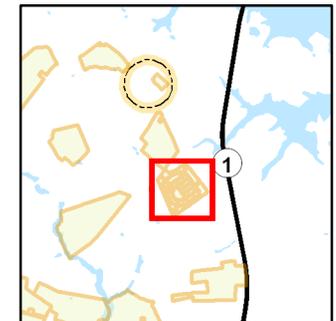


Hatteras Hills
2016-10-02

Legend

PLUS Project Areas

Location Map



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