

SITE PLAN

FOR MAJOR OR
MINOR SITE PLAN
APPROVAL

City of Wilmington, NC
Planning Division

P. O. Box 1810, 305 Chestnut St, Wilmington, NC 28402
Telephone: (910) 254-0900 FAX: (910) 341-3264

Section A. SITE DATA SHEET

DEVELOPMENT NAME: ~~Conversion to Waffle House~~ Waffle House Conversion
STREET ADDRESS: 2448 Carolina Beach Road
NEW HANOVER COUNTY TAX PARCEL IDENTIFICATION # (PARID): RO6018-005-010-000

ZONING DISTRICT(S): CS TOTAL SITE ACRES: 0.817
PROPOSED ZONING DISTRICT: CS

CLIENT (Owner or Developer):
Name(s) Waffle House, Inc.
Address: 5986 Financial Drive
Norcross, GA ZIP 30071
Telephone: 770-729-5868 FAX: _____
E-Mail Address: dennymuyres@wafflehouse.com

CONSULTANT/AGENT (Person to contact regarding questions or revisions to the plan):
Name(s) Jack D. Reel, P.E.
Address: 215 S. Kerr Avenue
Wilmington, NC ZIP 28403
Telephone: 910-332-3400 FAX: _____
E-Mail Address: reel.j@thomasandhutton.com

NOTE: IF SITE IS IN A CONDITIONAL ZONING DISTRICT OR IF THE SITE HAS SPECIAL USE PERMIT, PLACE THE COMPLETE LIST OF ZONING CONDITIONS ON THE PLAN.

ALL PLANS:
PROPOSED BUILDING USE: Restaurant
TOTAL BUILDING AREA (gross sq. ft.) EXISTING: 2,904 PROPOSED: 2,864
EXISTING AND PROPOSED BUILDING HEIGHT: Same
IF MULTI-FAMILY HOUSING (Apts. / Condo), LIST HEIGHTS OF EACH BUILDING TYPE: _____
NUMBER OF BUILDING(S) EXISTING: 1 PROPOSED: N/A
OFF STREET PARKING: REQ'D SPACES: N/A-existing 34 spaces PROVIDED SPACES: 39
PARKING GROUP/STANDARD APPLIED: (i.e. "1 space per 300 s.f. building area"): _____
APT./CONDO/TOWNHOME: # 1BR Units: _____ 2BR: _____ 3BR: _____ 4BR: _____

A Traffic Impact Analysis (TIA) is required with the submittal of an application where more than 100 vehicle trips during any peak hour anticipated? The AM PEAK HOUR is: 31 The PM PEAK HOUR is: 28
The ITE Land Use Number used is: No application will be reviewed without the submittal of the TIA, when required.

OWNER'S SIGNATURE: *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 site plan as approved by the City. I hereby designate Jack D. Reel 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 attest that the information contained in this application and all supplemental materials and documents associated with this project are true and accurate.*

Owner's Name (print): WAFFIE House INC.
Owner's Signature/Date: Dennis M. MUYRES 7-17-2013
DENNIS M. MUYRES
REALESTATE REP. WAFFIE HOUSE, INC.

DATE RECD: 7/24/13
PLANNER: JDR for DMS
CASE FILE #: _____
FEE PAID \$: 310.00

RECEIVED

JUL 24 2013

PLANNING DIVISION