



Design Review

THE PINES AT DAVIDSON

(Name of Project)

Project Description

Application Date:

APRIL 18, 2018

Project Location:

400 AVINBER LANE, DAVIDSON

Tax Parcel(s):

Planning Area:

SPECIAL USE

Overlay District:

Master or Cond. Plan

(Attach Conditions of Approval)

YES

Gen. Statement of
Intent:

ADDITION OF (2) VILLA APARTMENTS
(1) SKILLED NURSING ADDITION, MULT-PURPOSE
ADDITION & FITNESS ADDITION PER
APPROVED MASTER PLAN

Project Details:

• Project Type:



Individual Bldg



Master Plan



Conditional Planning Area



Sign

• Building Type:



Detached House



Townhouse



Attached House (Tri- or Quadplex)



Institutional



Live/Work



Multi-family (Apts., Condos, Flats)



Workplace



Storefront



Accessory Structure

• Use(s):

SKILLED NURSING / INDEPENDANT SENIOR HOUSING

• Height & Stories:

(2) 30' / (4) 55'

• Square Footage:

• Building Materials:

BRICK / SIDING

Architectural

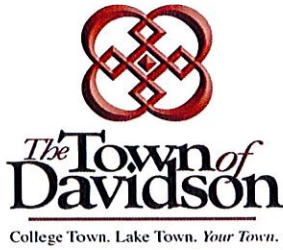
Features:

Existing Site

Conditions:

See 14.12.2.D

EXISTING CAMPUS



Design Review

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Contact Information

Applicant's Information

Name:

DAVE MALUSHIUK

E-Mail:

DAVEM@THERBAGROUP.COM

Mailing Address:

122 W BLANK ST SUITE B

CHARLOTTE NC, 28203

Business Phone:

980 256 7660 Mobile Phone: 704 975 5960

Property Owner's Information

(If Different from Applicant)

Name:

DAVID RAINEY c/o THE PINES

E-Mail:

DRANEY@THEPINES@DAVIDSON.ORG

Mailing Address:

400 AVENGER LANE

DAVIDSON NC 28034

Business Phone:

877 432 9951

Mobile Phone:

Architect's Information

Name of Firm:

SAME AS APPLICANT

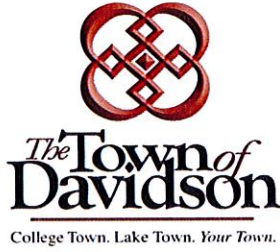
Architect's Name:

E-Mail:

Mailing Address:

Business Phone:

Mobile Phone:



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Development Process

Date Completed

Outline of Steps & Checklist

2.12.12



1. Initial Meeting

4.12.12



2. Application and Fee

4.18.12



3. Design Review Board Preliminary Review (Informational)

2.13



4. Planning Director Site Schematic Design Review



5. Design Review Board Approval



6. Building Construction Documents



7. Site and Landscape Construction Documents



8. Architect's Letter of Verification (Construction Documents)



9. Building Permit Approval



10. CD Submittal with PDF of All Approved Documents

Required within 45 Days of Approval



11. Architect's Letter of Verification (Construction/As-Built)



12. Certificate of Occupancy

** For further information see Davidson Planning Ordinance Sections 14.11 Individual Building - 14.12 Design Review. Note that the Town of Davidson encourages all paper submittals to be on 30% or greater recycled paper.*



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Application Requirements

Date Received

4.18.18

2.12.18

4.18.18

4.18.18

4.18.18

4.18.18



Application Fee per Town of Davidson Fee Schedule



Contact Information



General Statement of Intent

(Use, building type, approx. square footage, height, design features)



Statement of Compliance with Section 2



Master Plan or Conditional Planning Area

(Including all documents, plans, maps, and conditions of approval)



Environmental Inventory in accordance with Section 14.15.1

(Including adjacent properties and buildings)



General Description

(Including a description and color photographs to existing / adjacent site)



Site Schematic Design in accordance with Section 14.15.7



Building Schematic Design in accordance with Section 14.15.3

(Including rendered elevations of each façade per 14.15.3 C)



Landscape Schematic Design in accordance with Section 14.15.5



Building Perspective



Building Materials/Colors

(Roofing, siding, doors, windows, etc.)

As the applicant, I hereby confirm that all the required materials for this application are authentic and have been submitted to the Town of Davidson Planning Department.

Applicant's Signature

Date

Section 22 Local Historic District Guidelines