NEW HANOVER COUNTY
DEPARTMENT OF PLANNING & LAND USE
230 Government Center Drive, Suite 110
Wilmington, North Carolina 28403
Telephone (910) 798-7165
FAX (910) 798-7053
planningdevelopment.nhcgov.com

SPECIAL USE PERMIT APPLICATION

This application form must be completed as part of a special use permit application submitted through the county's online COAST portal. The main procedural steps in the submittal and review of applications are outlined in the flowchart below. More specific submittal and review requirements, as well as the standards to be applied in reviewing the application, are set out in Section 10.3.5 of the Unified Development Ordinance.

**Public Hearing Procedures**

(Optional) 1* Community Information Meeting 2 Application Submittal & Acceptance 3 Planning Director Review & Staff Report (TRC Optional) 4 Public Hearing Scheduling & Notification 5 Planning Board Hearing & Recommendation 6 Board of Commissioners Hearing & Decision 7 Post-Decision Limitations and Actions

*If the proposed use is classified as intensive industry, the applicant shall conduct a community information meeting in accordance with Section 10.2.3, Community Information Meeting.

1. Applicant and Property Owner Information

<table>
<thead>
<tr>
<th>Applicant/Agent Name</th>
<th>Owner Name (if different from Applicant/Agent)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allison Jordan</td>
<td>Coastal Community Baptist Church</td>
</tr>
<tr>
<td>Company</td>
<td>Company/Owner Name 2</td>
</tr>
<tr>
<td>Seacoast Christian Academy</td>
<td></td>
</tr>
<tr>
<td>(a ministry of Coastal Community Baptist Church)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>7721 Alexander Rd.</td>
<td>same</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State, Zip</th>
<th>City, State, Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wilmington, NC 28411</td>
<td>same</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>910-686-7775</td>
<td>same</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Email</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="mailto:allison@seacoastchristiannc.com">allison@seacoastchristiannc.com</a></td>
<td><a href="mailto:greg@gotocoastal.com">greg@gotocoastal.com</a></td>
</tr>
</tbody>
</table>

2. Subject Property Information

<table>
<thead>
<tr>
<th>Address/Location</th>
<th>Parcel Identification Number(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>7721 Alexander Rd.</td>
<td>R03600-003-007-000 / R03600-003-007-001</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Parcel(s) Acreage</th>
<th>Existing Zoning and Use(s)</th>
<th>Future Land Use Classification</th>
</tr>
</thead>
<tbody>
<tr>
<td>19.61 acres</td>
<td>R-15 Residential District</td>
<td>Community Mixed Use/General Residential</td>
</tr>
</tbody>
</table>

Applicant Tracking Information (This section completed by staff)

<table>
<thead>
<tr>
<th>Case Number:</th>
<th>Date/Time Received:</th>
<th>Received by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>S20-02</td>
<td>10:00 am 6/9/2020</td>
<td>GHS</td>
</tr>
</tbody>
</table>
3. Proposed Zoning, Use(s), & Narrative

Please list the proposed use(s) of the subject property, and provide the purpose of the special use permit and a project narrative (attach additional pages if necessary).

Child care facility for Seacoast Christian Academy for children ages 16 months to 6 years old. Hours of operation from 7:30-3:00 Monday-Friday. Seacast, which will operate inside of our existing building, Coastal Community Baptist Church facility and is in keeping with our church mission to positively impact our community. The facility is within the specifications to meet NC state regulations for a daycare center. We will use classrooms that will host appropriate number of children by NC regulations. We have completed criminal background investigations for the Director and the pastor. We have submitted initial licensing paperwork to NC Child Care DHHS, as a 501(c)3 religious organization, to take the required steps to qualify as a licensed childcare facility under a Notice of Compliance (NCGS 110-106) to keep children longer than 4 hours. For safety, precautionary measures are in place. We have installed security cameras throughout the building.

4. Proposed Condition(s)

Please note: Within a special use permit proposal, additional conditions and requirements which represent greater restrictions on the development and use of the property than the corresponding zoning district regulations may be added. These conditions may assist in mitigating the impacts the proposed development may have on the surrounding community. Please list any conditions proposed to be included with this special use permit application below. Staff, the Planning Board, and Board of Commissioners may propose additional conditions during the review process that meet or exceed the minimum requirements of the Unified Development Ordinance.

N/A

5. Traffic Impact

Please provide the estimated number of trips generated for the proposed use(s) based off the most recent version of the Institute of Traffic Engineers (ITE) Trip Generation Manual. A Traffic Impact Analysis (TIA) must be completed for all proposed developments that generate more than 100 peak hour trips, and the TIA must be included with this application.

<table>
<thead>
<tr>
<th>ITE Land Use:</th>
<th>Day Care Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trip Generation Use and Variable (gross floor area, dwelling units, etc.)</td>
<td>6,631 sq ft</td>
</tr>
<tr>
<td>AM Peak Hour Trips:</td>
<td>74</td>
</tr>
<tr>
<td>PM Peak Hour Trips:</td>
<td>74</td>
</tr>
</tbody>
</table>
6. Criteria Required for Approval of a Special Use Permit

A use designated as a special use in a particular zoning district is a use that may be appropriate in the district, but because of its nature, extent, and external impacts, requires special consideration of its location, design, and methods of operation before it can be deemed appropriate in the district and compatible with its surroundings. The purpose is to establish a uniform mechanism for the review of special uses to ensure they are appropriate for the location and zoning district where they are proposed.

For each of the four required conclusions listed below, include or attach a statement that explains how any existing conditions, proposed development features, or other relevant facts would allow the Board of County Commissioners to reach the required conclusion, and attach any additional documents or materials that provide supporting factual evidence. The considerations listed under each required conclusion are simply those suggested to help the applicant understand what may be considered in determining whether a required conclusion can be met. Any additional considerations potentially raised by the proposed use or development should be addressed.

1. The use will not materially endanger the public health or safety if located where proposed and approved.
   
   Considerations:
   - Traffic conditions in the vicinity, including the effect of additional traffic on streets and street intersections, and sight lines at street intersections with curb cuts;
   - Provision of services and utilities, including sewer, water, electrical, garbage collections, fire protection;
   - Soil erosion and sedimentation;
   - Protection of public, community, or private water supplies, including possible adverse effects on surface waters or groundwater; or
   - Anticipated air discharges, including possible adverse effects on air quality.

The proposed approval of Seacoast Christian Academy will not have any adverse impact on the surrounding community, traffic and environment. Seacoast will be housed inside Coastal Community Baptist Church facility except when children will be allowed to play outside in a fenced playground that allows the natural absorption of water. Seacoast will operate from 7:30-3:00, Monday-Friday, when normal church services are not conducted. The current facility does not require any modifications in sewage, water run-off, emmissions, traffic, etc. to accommodate the approve of this special use permit.

2. The use meets all required conditions and specifications of the Unified Development Ordinance.

Seacoast Christian Academy is an extension of Coastal Community Baptist Church. The building accomodates Seacoast and meets New Hanover County zoning standards. Ninety percent (90%) of Seacoast's activities will be on the inside of the current facility. The current facility does not require any modifications in sewage, water run-off, emmissions, traffic, etc. to accommodate the approve of this special use permit.
3. The use will not substantially injure the value of adjoining or abutting property, or that the use is a public necessity.

Considerations:

- The relationship of the proposed use and the character of development to surrounding uses and development, including possible conflicts between them and how these conflicts will be resolved (i.e. buffers, hours of operation, etc.).
- Whether the proposed development is so necessary to the public health, safety, and general welfare of the community or County as a whole as to justify it regardless of its impact on the value of adjoining property.

We believe that Seacoast will be a welcomed addition to our fast growing community as it offers convenient, safe services to families in this and surrounding neighborhoods. 90% of Seacoast’s activities will be on the inside of the facility. Most of Seacoast’s positive contributions to the community will be felt but not physically seen. The current facility does not require any modifications in sewage, water run-off, emissions, traffic, etc. to accommodate the approval of this special use permit.

4. The location and character of the use if developed according to the plan as submitted and approved will be in harmony with the area in which it is to be located and in general conformity with the New Hanover County Comprehensive Land Use Plan.

Considerations:

- The relationship of the proposed use and the character of development to surrounding uses and development, including possible conflicts between them and how these conflicts will be resolved (i.e. buffers, hours of operation, etc.).
- Consistency with the Comprehensive Plan’s goals, objectives for the various planning areas, its definitions of the various land use classifications and activity centers, and its locational standards.

Seacoast is in sink with the New Hanover County’s Comprehensive Land Use Plan. Seacoast is an excellent facility, offering the right services to help provide another beneficial component to the community and additional construction, zoning or traffic patterns are necessary for this endeavor.
Staff will use the following checklist to determine the completeness of your application. Please verify all of the listed items are included and confirm by initialing under "Applicant Initial". If an item is not applicable, mark as "N/A". Applications determined to be incomplete must be corrected in order to be processed for further review; Staff will confirm if an application is complete within five business days of submittal.

**Application Checklist**

☑ This application form, completed and signed

☑ Application fee:
  - $500; $250 if application pertains to a residential use (i.e. mobile home, duplex, family child care home).

☑ Traffic Impact Analysis (if applicable)

☑ Site Plan including the following elements:
  - Tract boundaries and total area, location of adjoining parcels and roads
  - Proposed use of land, structures and other improvements
    - For residential uses, this shall include number, height, and type of units; area to be occupied by each structure; and/or subdivided boundaries.
    - For non-residential uses, this shall include approximate square footage and height of each structure, an outline of the area it will occupy, and the specific purposes for which it will be used.
  - Development schedule, including proposed phasing
  - Traffic and parking plan; including a statement of impact concerning local traffic near the tract; proposed right-of-way dedication; plans for access to and from the tract; location, width, and right-of-way for internal streets and locations; arrangement and access provisions for parking areas
  - All existing and proposed easements, reservations, required setbacks, rights-of-way, buffering, and signage
  - The location of Special Flood Hazard Areas, if applicable
  - The approximate location of US Army Corps of Engineers Clean Water Act Section 404 wetlands, Rivers and Harbors Act Section 10 wetlands, and wetlands under jurisdiction of the NC Department of Environmental Quality.
  - Location, species, and size (DBH) of regulated, significant, or specimen trees
  - Any additional conditions and requirements that represent greater restrictions on development and use of the tract than the corresponding general use district regulations or additional limitations on land that may be regulated by Federal or State law or local ordinance.
  - Any other information that will facilitate review of the proposed special use permit (Ref. Section 10.3.5, as applicable)

☐ Applications for uses in the intensive industry category must also submit:
  - Community meeting written summary
  - A list of any local, state, or federal permits required for use

One (1) hard copy of ALL documents AND 5 hard copies of the site plan. Additional hard copies may be required by staff depending on the size of the document/site plan.

☑ One (1) digital PDF copy of ALL documents AND plans
7. Acknowledgement and Signatures

By my signature below, I understand and accept all of the conditions, limitations, and obligations of the special use permit for which I am applying. I understand that the existing Official Zoning Map is presumed to be correct. I understand that I have the burden of proving that the proposal meets the four required conclusions. I certify that this application is complete and that all information presented in this application is accurate to the best of my knowledge, information, and belief.

If applicable, I also appoint the applicant/agent as listed on this application to represent me and make decisions on my behalf regarding this application during the review process. The applicant/agent is hereby authorized on my behalf to:

1. Submit an application including all required supplemental information and materials;
2. Appear at public hearings to give representation and comments; and
3. Act on my behalf without limitations with regard to any and all things directly or indirectly connected with or arising out of this application.

Beg* Halke Pastor
Signature of Property Owner(s)

Greg Hales
Print Name(s)

Allison Jordan
Signature of Applicant/Agent

Allison Jordan
Print Name

Note: This form must be signed by the owner(s) of record. If there are multiple property owners, a signature is required for each owner of record.

The land owner or their attorney must be present for the application at the public hearings.

If an applicant requests delay of consideration from the Planning Board or Board of County Commissioners before notice has been sent to the newspaper, the item will be calendared for the next meeting and no fee will be required. If delay is requested after notice has been sent to the newspaper, the Board will act on the request at the scheduled meeting and are under no obligation to grant the continuance. If the continuance is granted, a fee in accordance with the adopted fee schedule as published on the New Hanover County Planning website will be required.

<table>
<thead>
<tr>
<th>Applicant Tracking Information (This section completed by staff)</th>
</tr>
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<tbody>
<tr>
<td><strong>Application Received:</strong> June 9, 2020</td>
</tr>
<tr>
<td><strong>Completeness Determination Required by (date):</strong> June 17, 2020</td>
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<tr>
<td><strong>Determination Performed on (date):</strong></td>
</tr>
<tr>
<td><strong>Planning Board Meeting:</strong> July 9, 2020</td>
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## Seacoast Christian Academy

### Projected Students

<table>
<thead>
<tr>
<th>Time of Day</th>
<th>Monday-Wednesday-Friday</th>
<th>Tuesday-Thursday</th>
<th>Monday-Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Entering</td>
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</tr>
<tr>
<td>7:30-8:00</td>
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<td>8:45-9:15</td>
<td>40</td>
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<td>30</td>
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<tr>
<td>12:15-12:45</td>
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<td>40</td>
<td>30</td>
</tr>
<tr>
<td>1:45-2:45</td>
<td>25</td>
<td>25</td>
<td>20</td>
</tr>
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</table>
## Projected Vehicles

<table>
<thead>
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<th>Time of Day</th>
<th>Monday-Wednesday-Friday</th>
<th>Tuesday-Thursday</th>
<th>Monday-Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Leaving</td>
<td>Entering</td>
</tr>
<tr>
<td>7:30-8:00</td>
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<tr>
<td>8:45-9:15</td>
<td>35</td>
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<td>25</td>
</tr>
<tr>
<td>12:15-12:45</td>
<td>35</td>
<td>35</td>
<td>25</td>
</tr>
<tr>
<td>1:45-2:45</td>
<td>23</td>
<td>23</td>
<td></td>
</tr>
</tbody>
</table>

Projected around 120 students but attending different days. Some on MWF and some TTH (less vehicles for siblings and carpools) but will also attend different hours. Vehicles will enter from different entrances off Market St. as well. These are estimates based on projected enrollment for upcoming approvals. Seacoast is flexible with varying times and will adjust upon recommendations to make the traffic flow in the best interest of all involved.
Child Care/Adult Day/School Building Application

Type of Construction: □ NEW  ☑ EXISTING  □ REMODEL

Was the building built prior to 1978? Yes □  No ☑
If yes, a lead investigation must be conducted before plans will be reviewed.

Type of Establishment: ☑ Child Care Center - Hours of operation: 7:30 - 3:00
□ Adult Day Care
□ School Building

Name of Establishment: Seacoast Christian Academy (a ministry of Coastal Community Baptist Church)
Address: 7721 Alexander Rd  City: Wilmington  Zip: 28411
Establishment Phone: 910-686-7775  Email: allison@seacoastchristiannc.com

Applicant's Name: Allison Jordan  Applicant's Title: Director
(Owner, Manager, Architect)
Address: 7721 Alexander Rd  City: Wilm  State: NC  Zip: 28411
Phone: 910-686-7775  Fax: 910-686-7773  E-mail: allison@seacoastchristiannc.com

Owner of the Establishment (if different from applicant):
Coastal Community Baptist Church
Address: 7721 Alexander Rd  City: Wilm  State: NC  Zip: 28411
Phone: 910-686-7775  Fax: 910-686-7773  E-mail: greg@gotocoastal.com

Contractor name & contact number: N/A

Projected Start Date of Project: 8/2021  Projected Opening Date: 8/2021

I certify that the information in this application is correct and I understand that any deviation without prior approval from this Health Regulatory Office may nullify plan approval.

Print Name: Allison Jordan  Signature: Allison Jordan

“Healthy People, Safe Environment, Strong Community”
New Hanover County
Health Department
Environmental Health Services
230 Government Center Dr., Suite 140
Wilmington, NC 28401-4946
Telephone (910) 798-6667, Fax (910) 798-7815

THE FOLLOWING ITEMS MUST BE SUBMITTED TO BEGIN PLAN REVIEW

☑ Completed Application

☐ Copy of signed lease agreement or bill of sale

N/A ☐ Copies of all menus or list source of food

☐ Proof of water supply (well permit or bill)

☐ Proof of sewage disposal (septic permit or bill)

☑ Site plan showing specific location of the property and playground

☑ Floor plan drawn to scale (minimum 1/4” = 1’) of establishment with all equipment rooms, bathrooms, diaper changing and infant feeding stations, ice machines, hand washing sinks, washer and dryers, showers, cubbies/lockers, locked storage areas, mixing sink for chemicals, employee bathrooms, chemical storage area, cleaning cart storage areas and location for cleaning the carts, storage areas for toiletries, paper products, furniture, potty chairs, cribs & mats, can wash/mop basin, sick child area, and etc.

☑ Equipment specification sheets for all food service equipment (refrigeration, sinks, hot water heaters, etc).

☑ Plumbing Plan (show floor drains, floor sink, water heater)
   Hot and cold water is required at all points of use in adult day and child care centers. Adult Day (90°F-120°F) Child Care Centers (80°F-110°F)

☑ A dumpster contract

☑ Diagram showing the age and number of children for each class room

“Healthy People, Safe Environment, Strong Community”
NC DHHS Plan Review Guidelines:

NC DHHS Child Care Center Rules:

NC DHHS Adult Day Service Rules:

NC DHHS Sanitation of Public, Private and Religious School Rules:

Will multi-use plates, silverware, cups or sippy cups be provided? Yes ☑ No ☐ If yes, where will they be stored and how will they be washed and sanitized? Sippy cups will be thoroughly washed by hand in kitchen and stored in classroom cabinets.

Will foodservice occur in the classrooms? Yes ☐ No ☑

How will milk bottles be heated and in what areas? N/A

How will toys, equipment and furniture be cleaned and sanitized? Daily wiped down and sanitized with approved disinfectant.

Will there be any wood used in the playground area? Yes ☐ No ☑

Will linens be washed on-site? Yes ☐ No ☑ If off-site linen service is used, provide specific details on where linens will be washed and how they will be transported. N/A

Will live animals be kept on premises? Yes ☐ No ☑

Can wash must be large enough to accommodate the cleaning of all trash cans. Minimum 3x3 curb floor sink sloped to drain, hot and cold mixing water with backflow prevention, 4" curb, backsplash and impervious surface.

Finish Schedule:
Applicants must fill in materials (i.e. quarry tile, 6" plastic cove molding, carpeting, etc.)

<table>
<thead>
<tr>
<th></th>
<th>Floors</th>
<th>Walls</th>
<th>Ceilings</th>
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</thead>
<tbody>
<tr>
<td>Bathrooms</td>
<td>tile</td>
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<td>acoustical tile</td>
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<tr>
<td>Classrooms</td>
<td>carpet</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diaper Changing Areas</td>
<td>carpet</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food Service Areas</td>
<td>tile</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hallways</td>
<td>carpet</td>
<td></td>
<td>sheetrock</td>
</tr>
<tr>
<td>Infant Feeding Areas</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
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</tbody>
</table>

"Healthy People, Safe Environment, Strong Community"
<table>
<thead>
<tr>
<th>Laundry</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>Stairs</td>
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</tr>
</tbody>
</table>

Completed by: Allison Jordan  
Date 6/9/2020

"Healthy People, Safe Environment, Strong Community"
Account: 10150839
Service Address: 771 ALEXANDER RD
Issue Date: 03/19/2020

Account Summary:

<table>
<thead>
<tr>
<th>Previous Balance</th>
<th>Payment</th>
<th>Opening Balance</th>
<th>Current Charges 04/18/2020</th>
<th>Total Due</th>
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<tr>
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<td>$0.00</td>
<td>$0.00</td>
<td>$367.80</td>
<td>$367.80</td>
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</tbody>
</table>

Important Information:
- Your activation code for our customer portal is C7FB67.

CFPUA Charges:

- Non Res Sewer Base: $72.75, $24.64
- Non Res Sewer Base: $145.50, $96.22
- Non Res Sewer Consumption: 8.84 TGL, $4.63, $40.93
- Water Base: $68.90, $23.34
- Water Base: $137.80, $91.13
- Water Consumption: 8.84 TGL, $4.02, $35.54
- Fire Line: 42 days, $80.00, $56.00

Total CFPUA Charges: $367.80

Meter Readings:

<table>
<thead>
<tr>
<th>Meter ID</th>
<th>Present Read</th>
<th>Read Date</th>
<th>Previous Read</th>
<th>Read Date</th>
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<tbody>
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<td>8.84 TGL</td>
<td>03/09/2020</td>
<td>0 TGL</td>
<td>01/28/2020</td>
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</tbody>
</table>

Return this portion with your payment.
### Front-Load Service Agreement

**Customer/ Business Name:** Coastal Community Baptist Church

**Address:** 7721 Alexander Rd

**City:** Wilmington  
**State:** NC  
**Zip code:** 28411

**Point of Contact:** Aaron Lee  
**Phone:** 910-686-7775

**Email Address:** aaron@gotocoastal.com

**Billing:**

**Address:** Same

**City:**  
**State:**  
**Zip code:**

**Point of Contact:**  
**Phone:**

**Email Address:**

### Service

**Start Date:**

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Size of Container</th>
<th>Cont. Quantity</th>
<th>Service Interval</th>
<th>Service Days</th>
<th>Billing Cycle</th>
<th>Monthly Total</th>
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<tbody>
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<td>M/IX</td>
<td>M</td>
<td>M</td>
<td>80</td>
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<tr>
<td>Recycle</td>
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</tr>
<tr>
<td>Cardboard</td>
<td></td>
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</table>

**TOTAL MONTHLY BALANCE AGREEMENT**

### Additional Costs

<table>
<thead>
<tr>
<th>Delivery Fee (Per container)</th>
<th>Wheel Installation (2yd &amp; 4yd)</th>
<th>Lockbar Installation</th>
<th>Extra Pickups On Call Service</th>
<th>Relocation fee</th>
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</thead>
<tbody>
<tr>
<td>$50.00</td>
<td>$300.00</td>
<td>$150.00</td>
<td>$75.00</td>
<td>$100.00</td>
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</table>

**Total First Month Balance $** 80

(This payment will be due upfront prior to the delivery of the container(s).)
Terms and Conditions

By agreeing to utilize Select Recycling Waste Services, the customer hereby warrants that any right of way provided by customer for the waste hauler’s equipment is sufficient to bear the weight of all equipment and vehicles reasonably required to perform the service herein contracted. SRWS shall not be responsible for damage to any private driving surface, pavement or accompanying sub-surface of any route reasonably necessary to perform the service herein contracted and customer assumes all liabilities for damage to driving surfaces, pavement, or road surfaces and entire container placement site. Please be advised that all damage claims need to be reported within 48 hours to our office as well as pictures sent to admin@srwscorp.com to be credible for evaluation.

Customers are responsible for the contents and weight of their front-end containers, regardless of who disposes waste into those containers. All illegal or unauthorized dumping will be the sole responsibility of the account holder. We suggest that all customers take measures to secure their containers to prevent illegal dumping. Front-load trash container(s) do not accept any of the following materials: construction debris, hazardous materials/chemicals, mattresses, and tires.

The first month’s payment, with any additional charges, will be due upfront under a billing cycle of either the 1st or 15th of the month based on service start date. In the event of a missed pickup, please call our office and allow 24 hours to perform service. No credit will be given for missed pickups unless authorized by a supervisor. In the event of non-payment past 60 days, the account will be locked, and services will not be provided. If non-payment exceeds 90 days, the containers will be removed from the premises and customer will be subjected to any fee(s) for redelivery.

As we are working toward a greener future, SRWS has decided to incorporate Electronic Billing. We require an email address for your account, providing you with a faster way to receive your Invoices. Please be aware that if you wish to receive our Invoices via mail, you will be subjected to a convenience fee of $2.00.

SRWS requires a valid debit or credit card on your account. All credit card transactions require a $7.00 nonrefundable processing fee. Please be advised that your card will remain on file for any past due balances processed in avoidance of any service interruptions. In addition, SRWS now offers Secure Online Bill Pay. Please visit our website at www.srwscorp.com, for an easier and more efficient way to pay your bill online. Please look at the bottom of your Invoice for an Access Code to sign up.

SRWS will keep dumpster clean. At our location.

Here at SRWS, we take pride in our service and want you to choose us, therefore you are not under contract for these services. This is solely an agreement to the terms in choosing our company. This document must be signed prior to delivery of container(s).

CUSTOMER NAME: Aaron Lee
CUSTOMER SIGNATURE: [Signature]
Date: 6/3/20
NEW HANOVER COUNTY
BUILDING SAFETY DEPARTMENT
230 Government Center Dr. Suite 170
Phone (910) 798-7308

REVISIONS

PERMIT #: 20-004327    DATE SUBMITTED: 5/13/2020

Project’s Street Address: 7721 Alexander Rd.    City: Wilmington
Contractor:                  License #:              
Email: allison@seacostchristiannc.com    Phone Number: 910-686-7775

The Revisions are for:    (Check all that apply)

☑ Correction to Denied Plans    ☐ Revision to Previously Approved Plans
☐ Plans Related Documents (Energy Calculations, Supplemental Sheets, etc.)
☐ Other(explain below)

Is there a Change in the Occupancy Type from what is shown on the original application?
☐ YES (if yes explain below)    ☐ NO

Is there a Change or Increase in Square Footage from what is shown on the original application?
☐ YES (if yes explain below)    ☐ NO

Is there a Change or Increase in Cost from what is shown on the original application?
☐ YES (if yes explain below)    ☐ NO

Please give us a brief but detailed description of your revisions and/or documents including changes in square footage, if changes affect project cost, and the updated project cost.

Occupant load of 200
Number of children to be in facility - 160

**These items were needed for a re-submit on original application

If revisions are considered “substantial” it may require a new application.

Allison Jordan
Print Name

ATENTION PLANS EXAMINER: Please notify DSC if these revisions change the permit footprint/square footage information and/or cost of the project.