



DURHAM CITY-COUNTY PLANNING DEPARTMENT
NEIGHBORHOOD PROTECTION OVERLAY
APPLICATION



SUBMIT TO:
Durham City-County Planning Department,
101 City Hall Plaza, Durham, NC 27701

Submittal Date:		Case Number:	
Applicant			
Name:			
Address:			
City:	State:	Zip Code:	
Phone:		Email:	
Applicant Signature: <i>(I (We) understand that this complete application must be submitted by June 15th for consideration in the current calendar year)</i>			
Neighborhood Information			
Proposed Neighborhood Overlay Name:			
Proposed Boundaries: Provide a map or description of proposed boundaries for the overlay.			
Proposed Elements to Regulate (check box if applicable):			
<input type="checkbox"/> Use Regulations (Article 5) Specify if known: _____			
<input type="checkbox"/> District Intensity Standards (Article 6) Specify if known: _____			
<input type="checkbox"/> Design Standards (Article 7) Specify if known: _____			
<input type="checkbox"/> Tree Coverage standards (Article 8) Specify if known: _____			
<input type="checkbox"/> Landscaping and/or Buffering Standards (Article 9) Specify if known: _____			
<input type="checkbox"/> Sign Standards (Article 11) Specify if known: _____			
The following attachments, although not required, are provided with this application (check box if attached):			
<input type="checkbox"/> Petition of Support		<input type="checkbox"/> Description of Neighborhood History	
<input type="checkbox"/> Design Elements Worksheet		<input type="checkbox"/> Neighborhood Outreach Materials	
<input type="checkbox"/> Other:			