



# Development Review

## Concept Meeting Request

Development Services Center

City-County Development Services Center

101 City Hall Plaza, Durham, NC 27707 | <https://dsc.durhamnc.gov> | 919-560-4137

### MEETING OVERVIEW

This meeting is meant to explain, in general terms, the development review process, what is allowable, and what may be required to accomplish the goals expressed by those in attendance. Information provided during the meeting is based on the information made available to staff during the time of the meeting and the ordinance regulations in place during the time of the meeting. The information obtained during the meeting is subject to modification based on change to project scope, ordinances, and policies.

### MEETING REQUEST INFORMATION

- Planning Department-only **“Concept Meeting Requests”** may be submitted at any time with meetings usually scheduled within one week of request on a first-come first-serve basis. Meetings are scheduled in 30 minute intervals and take place Thursdays between the hours of 1:00 and 5:00 pm (**with exception given for City Holidays**) Planning only re-submittal meeting requests should be arranged directly with the case planner.
- For meetings involving multiple departments, a **“Pre-submittal/Re-submittal Conference Request”** form must be submitted a minimum of one week in advance of the meeting. Multi-departmental meetings are scheduled for the 2nd and 4th Wednesday of each month (**with exception given for City Holidays**).
- A staff member will contact you with your meeting appointment time.
- Submittal instructions: Email the completed form to the Development Services Center | [dscticket@dsc.mojohelpdesk.com](mailto:dscticket@dsc.mojohelpdesk.com). Applications, supplemental forms, checklists, and notes can be found at: <https://dsc.durhamnc.gov/174/Permits-and-forms>

### Requested Meeting

Type of Meeting: <input type="checkbox"/> Concept <input type="checkbox"/> Pre-Submittal <input type="checkbox"/> Re-Submittal	Is the project associated with an approved plan? <input type="checkbox"/> Yes <input type="checkbox"/> No (Plan Name: _____)
Meeting Date: _____ Time (staff use only): _____	

### CONTACT INFORMATION

Name: _____	Company: _____
Phone: _____	E-mail: _____

### GENERAL PROJECT INFORMATION (Attach additional information if necessary)

Project Name and Description: _____	
Issues to Discuss: _____	
Address(s): _____	Existing use: _____
PIN(s) or PID(s): _____	Total Site Acreage: _____
Jurisdiction: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Both <input type="checkbox"/> Annexation Required	Project to be reviewed under: <input type="checkbox"/> City <input type="checkbox"/> County
Tier: _____	Zoning: _____
Overlay(s): _____	
Environmental (streams, floodplain, etc.): _____	

### LIST SPECIFIC QUESTIONS OR CONCERNS

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