Print Form

Planning & Development Services Department
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www.deltonafl.gov

CONCURRENT REVIEWS OF SITE PLAN AND BUILDING PERMIT APPLICATIONS FOR NON-RESIDENTIAL USES

Project Name: _____

Project Address:_____ Parcel No. _____

The City of Deltona will accommodate those who wish to file separate and concurrent Site Plan and Building Permit Applications.

Outline of Objectives
It is understood that the applicant's objectives are to save time and money through a parallel, not sequential, review of two separate, but related applications.

It is understood that the City's objectives are to provide effective and efficient customer service consistent with protecting the public health, safety, and welfare by ensuring compliance with all applicable codes and ordinances.

Applicant's Responsibilities and Acceptance of Possible Delay
While the City is prepared to assist customers by performing this concurrent review, it is the responsibility of the applicant, when submitting related plans and supporting documentation, to ensure these materials are complete, correct, clear, and align with all applicable code and ordinance provisions relating to the issuance of site plans, building permits.

Should a revision to the site plan application, as required by applicable code or ordinance, occur at any stage of review that results in the need to revise the building permit, the applicant accepts that both applications will undergo revisions in order to bring them into conformance with applicable code and ordinance provisions.

All additional review and/or revision costs related to concurrent reviews will be the responsibility of the applicant. The building permit will be issued after the Site Plan/D.O. has been released and the building plans have been approved.

For Developer/Applicant's signature: *If I choose to participate in this concurrent review process, I hereby acknowledge and accept the above conditions and responsibilities.*

☐ *It is requested that these applications undergo* ***Concurrent Review****.*

☐ *It is requested that these applications undergo* ***Separate Review****.*

_____	_____	_____
Applicant's Signature	*Print Applicant's Name*	*Date*

FOR OFFICE USE ONLY
(Do NOT write in this box)

Validate Address: _____

Project No.: _____ Building Permit No.: _____

P & D Services Staff: _____ *(initials)* Building Division Staff: _____ *(initials)*