Print Form

Planning & Development Services Department
2345 Providence Blvd, Deltona, FL 32725
Phone: (386) 878-8600 • Fax: (386) 878-8601
www.deltonafl.gov

APPLICATION FOR CONCURRENCY CERTIFICATE OF CAPACITY/INQUIRY

TYPE OF APPLICATION: ☐ (COC) Concurrency Certificate of Capacity
☐ (COI) Concurrency Certificate of Inquiry

I. PROJECT INFORMATION:

Located on County Road? ☐Yes ☐No

Project Name: _____

Address or location of Property:_____

Tax Parcel Number (s): _____ _____
(Please attach list of properties if multiple parcels and/or owners)

Gross Acres: _____ Number of Lots: _____ Zoning: _____

II. PROPERTY OWNER INFORMATION

Owner's Name (s): _____

Owners Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ E-mail: _____

III. ALL COMMUNICATION CONCERNING THIS APPLICATION WILL BE DIRECTED TO THE UNDERSIGNED:

Applicant/Developer's Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ Fax: _____ E-mail: _____

_____	_____	_____
Applicant's Signature	Print Name	Date

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

_____
PROJECT NO.

Required fees: $_____ ☐ Check No._____ ☐ Cash ☐ Credit Card Initials_____

The above mentioned property has a current zoning classification of _____. The proposed use of the property as _____ ☐ **is** a permitted use, ☐ **is** a conditional use, or ☐ **is not** consistent with the current zoning classification.

Comprehensive Plan land use designation:_____.
The proposed use ☐**is** or ☐**is not** consistent with the Comprehensive Land Use Designation.

_____	_____	_____
Signature & Title of Planning & Development Services Official	Print Name	Date