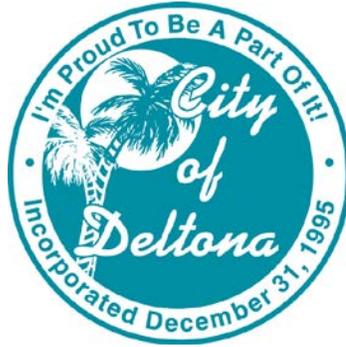


CITY OF DELTONA



PRELIMINARY PLAT & CONSTRUCTION PLAN APPLICATION PACKAGE

*PLANNING AND DEVELOPMENT SERVICES DEPARTMENT
2345 Providence Blvd
Deltona, FL 32725
Phone: (386) 878-8600 • Fax: (386) 878-8601
www.deltonafl.gov*



Planning & Development Services Department

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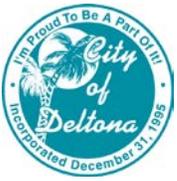
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PRELIMINARY PLAT AND CONSTRUCTION PLAN GENERAL INFORMATION

Developers seeking subdivision approval shall submit an application to the Planning and Development Services Department. Per Section 106-30 of the City of Deltona Land Development Code, two application submittal processes are provided for Plats:

Phased Developments

In all cases involving phased developments, the applicant shall file a Preliminary Plat and Construction Plan and, upon receipt of the related Development Order, may then file a Final Plat application for the first phase of the project.

No Final Plat application shall be filed until the Preliminary Plat (PP) and Construction Plan (CP) Development Order has been issued.

Preliminary Plat and Construction Plan Development Orders shall be filed, processed and approved consistent with Sections 74-3 and 74-4 of the City of Deltona Land Development Code.

Phased subdivisions applications shall include tables, illustrations, other ways to convey information that describe relevant geographic (i.e. boundary of phases), and measurable elements (i.e. number of lots) that pertain to each phase of the project and totals for the project as a whole, including those areas intended for public and private use.

(Land Development Code, Section 106-30(a)(1))

Non-Phased Developments

For subdivisions that do not involve phased developments, the developer may bypass the requirement to file a Preliminary Plat application and proceed to file the Final Plat and Construction Plan Development Order, as provided in the City's Land Development Code, Section 106-31(a)(1)b.

(Land Development Code, Section 106-30(a)(2))

All applicants who are prepared to submit a Preliminary Plat and Construction Plan application are strongly urged to participate in a pre-application meeting with City staff in order to discuss substantive issues related to the pending submittal.

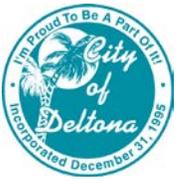
(Land Development Code, Section 106-30(b))

No application will be accepted unless all exhibits, plans, and fees have been supplied.

FEES:

(Resolution No. 2007-24)

Preliminary Plat Application	\$500.00 <i>(plus consulting fees, if applicable)</i>
Concurrency Certificate of Capacity/Inquiry Application	\$300.00 <i>(plus consulting fees, if applicable)</i>
Tree Removal Permit Application	\$350.00 <i>(plus consulting fees, if applicable)</i> <i>this is a permit fee and is exclusive of any fees owed to the City Tree Replacement Fund at \$18.04 of cross section square inch (CSSI)</i>



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**PRELIMINARY PLAT & CONSTRUCTION PLAN
BASIC SUBMITTAL CHECKLIST**

(Return this completed checklist with application)

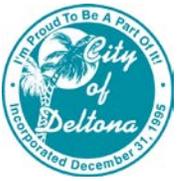
All applicants who are prepared to submit a Preliminary Plat and Construction Plan application are strongly urged to participate in a pre-application meeting with City staff in order to discuss substantive issues related to the pending submittal. (City of Deltona Land Development Code Section 106-30(b))

Project Name: _____

Address or location of Property: _____

REQUIRED MATERIALS	Applicant to check if completed	Staff to check if included
1. Application (completed and signed)	<input type="checkbox"/>	<input type="checkbox"/>
2. Preliminary Plat Content Requirements Checklist	<input type="checkbox"/>	<input type="checkbox"/>
3. Application Fees (\$500.00)	<input type="checkbox"/>	<input type="checkbox"/>
4. Owner's Authorization Form (if applicant is other than owner)	<input type="checkbox"/>	<input type="checkbox"/>
5. Eight (8) hard copies of the Preliminary Plat and Construction Plan package (ten (10) copies if the plat proposes to access a Volusia County roadway or is located in the Deltona North utility area)	<input type="checkbox"/>	<input type="checkbox"/>
6. Electronic copy of the Preliminary Plat and Construction Plan package (separate PDF for each plat sheet)	<input type="checkbox"/>	<input type="checkbox"/>
7. Two (2) current sealed surveys of property (no older than two (2) years)	<input type="checkbox"/>	<input type="checkbox"/>
8. Landscape Plan and Irrigation Plan (in accordance with the Land Development Code Section 110-808)	<input type="checkbox"/>	<input type="checkbox"/>
9. Tree Survey with Tree Removal & Replacement Calculations	<input type="checkbox"/>	<input type="checkbox"/>
a) Tree Removal Application	<input type="checkbox"/>	<input type="checkbox"/>
b) Fees for Tree Removal Permit (\$350.00)	<input type="checkbox"/>	<input type="checkbox"/>
10. Certificate of Concurrency Capacity/Inquiry	<input type="checkbox"/>	<input type="checkbox"/>
a) Application	<input type="checkbox"/>	<input type="checkbox"/>
b) Fees (\$300.00)	<input type="checkbox"/>	<input type="checkbox"/>

Please Note: Additional information may be required.



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**APPLICATION FOR PRELIMINARY PLAT
& CONSTRUCTION PLAN APPROVAL**

Phased Development Non-Phased Development

I. PROJECT INFORMATION

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. APPLICANT/DEVELOPER INFORMATION

Applicant/Developer's Name: _____ Professional Title: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ Fax: _____ E-mail: _____

IV. PROFESSIONAL SERVICES PROVIDER INFORMATION

Name: _____ Professional Title: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ Fax: _____ E-mail: _____

Signature of Property Owner or Representative _____ Print Name _____ Date

FOR OFFICE USE ONLY <i>(Do NOT write in this box)</i>		
\$ _____ APPLICATION FEE	<input type="checkbox"/> Check No. _____ <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card	_____ PROJECT NO. _____ APPLICATION RECEIVED BY _____ DATE



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**PRELIMINARY PLAT & CONSTRUCTION PLAN
CONTENT REQUIREMENTS CHECKLIST**

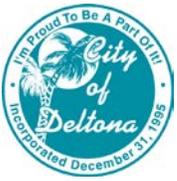
(Please mark all items that apply and submit this checklist with the application)

All applicants who are prepared to submit a Preliminary Plat and Construction Plan application are strongly urged to participate in a pre-application meeting with City staff in order to discuss substantive issues related to the pending submittal. (City of Deltona Land Development Code Section 106-30(b))

Project Name: _____

Address or location of Property: _____

CONTENT REQUIREMENTS CHECKLIST	Applicant to check if completed	Staff to check if included
A. PRELIMINARY PLAT AND CONSTRUCTION PLAN FORMAT		
1. Plat (scale: 1"=100', or other scale approved by the City Engineer; prepared on standard sheet sizes as required by F.S. Ch. 177, and shall be 22" x 28", including a three (3) inch binding margin on the left side and a one (1) inch margin on the other three (3) sides)	<input type="checkbox"/>	<input type="checkbox"/>
2. Construction Plan (submitted on 24" x 36" sheet sizes)	<input type="checkbox"/>	<input type="checkbox"/>
B. GENERAL INFORMATION AND GENERAL NOTES		
1. Survey of the subject property:	<input type="checkbox"/>	<input type="checkbox"/>
a) Prepared by a registered surveyor	<input type="checkbox"/>	<input type="checkbox"/>
b) Containing the legal description of the subject property, Property Appraiser's tax identification number(s), date of survey, and the surveyor's certificate of accuracy	<input type="checkbox"/>	<input type="checkbox"/>
c) Legal description of the subject property also be presented as part of a Word file	<input type="checkbox"/>	<input type="checkbox"/>
2. Vicinity Map (at a scale not to exceed 1"=2,000')	<input type="checkbox"/>	<input type="checkbox"/>
3. Acreage		
a) Total acreage in the tracts	<input type="checkbox"/>	<input type="checkbox"/>
b) Acreage in public or other land usage	<input type="checkbox"/>	<input type="checkbox"/>
4. Total number of lots	<input type="checkbox"/>	<input type="checkbox"/>
5. Linear feet of streets	<input type="checkbox"/>	<input type="checkbox"/>
6. Names and location of adjoining plats/subdivisions and lots (including the plat book and page number as applicable)	<input type="checkbox"/>	<input type="checkbox"/>



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CONTENT REQUIREMENTS CHECKLIST	Applicant to check if completed	Staff to check if included
7. Current zoning and existing uses of:		
a) Subject property	<input type="checkbox"/>	<input type="checkbox"/>
b) Adjacent and surrounding properties	<input type="checkbox"/>	<input type="checkbox"/>
8. Other supplemental information requested by the Planning and Development Services Director or DRC.	<input type="checkbox"/>	<input type="checkbox"/>
C. EXISTING SITE DATA		
1. City limit lines (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
2. Property lines	<input type="checkbox"/>	<input type="checkbox"/>
3. Easements	<input type="checkbox"/>	<input type="checkbox"/>
4. Streets	<input type="checkbox"/>	<input type="checkbox"/>
5. Rights-of-way	<input type="checkbox"/>	<input type="checkbox"/>
6. Cross Sections	<input type="checkbox"/>	<input type="checkbox"/>
7. Driveways	<input type="checkbox"/>	<input type="checkbox"/>
8. Railroads	<input type="checkbox"/>	<input type="checkbox"/>
9. Utility transmission lines	<input type="checkbox"/>	<input type="checkbox"/>
10. Adjacent street	<input type="checkbox"/>	<input type="checkbox"/>
11. Rights-of-way within 300 feet of the site	<input type="checkbox"/>	<input type="checkbox"/>
12. Storm sewers	<input type="checkbox"/>	<input type="checkbox"/>
13. Ditches and culverts	<input type="checkbox"/>	<input type="checkbox"/>
14. Sanitary sewer	<input type="checkbox"/>	<input type="checkbox"/>
15. Potable water	<input type="checkbox"/>	<input type="checkbox"/>
16. Reuse water infrastructure	<input type="checkbox"/>	<input type="checkbox"/>
17. Bridges	<input type="checkbox"/>	<input type="checkbox"/>
18. Buildings	<input type="checkbox"/>	<input type="checkbox"/>
19. Bulkheads	<input type="checkbox"/>	<input type="checkbox"/>
20. Wooded, wetland and 100 year floodplain areas	<input type="checkbox"/>	<input type="checkbox"/>
21. Marshes	<input type="checkbox"/>	<input type="checkbox"/>
22. Predominant plant communities	<input type="checkbox"/>	<input type="checkbox"/>
23. Watercourses and ponds	<input type="checkbox"/>	<input type="checkbox"/>



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CONTENT REQUIREMENTS CHECKLIST	Applicant to check if completed	Staff to check if included
24. Identify plants and animals which inhabit the site that are listed as federal and state: a) Endangered species b) Threatened species c) Species of special concern d) Known wildlife corridors	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
25. Identify topography of the site at not more than one (1) foot vertical contour intervals based on mean sea level data furnished by a professional engineer or surveyor.	<input type="checkbox"/>	<input type="checkbox"/>
26. Identify specific soil types and their limitations for the planned use. <i>(Soil information is to be taken from the most recent soil survey or from soil borings, if required.)</i>	<input type="checkbox"/>	<input type="checkbox"/>
27. Identify known historic and archaeological sites	<input type="checkbox"/>	<input type="checkbox"/>
D. PROPOSED SITE DATA AND CONSTRUCTION DETAILS		
1. Tentative construction schedule of the proposed development <i>(including, if applicable, a tentative schedule for phasing construction)</i>	<input type="checkbox"/>	<input type="checkbox"/>
2. Date of potable water and sanitary sewer facilities are needed to serve the proposed development	<input type="checkbox"/>	<input type="checkbox"/>
3. Commitment from the appropriate potable water and/or sanitary sewer provider demonstrating adequate capacity shall be available to service the proposed development at the time of impact as provided in Chapter 86 of the City's Land Development Code.	<input type="checkbox"/>	<input type="checkbox"/>
4. Engineering plans	<input type="checkbox"/>	<input type="checkbox"/>
5. Locations for all utilities <i>(including but not limited to, sanitary sewer, storm sewer, water lines, and electric lines (if located underground))</i>	<input type="checkbox"/>	<input type="checkbox"/>
6. Show connections to existing systems, stormwater detention or retention facilities or alternative stormwater control system, storm drainage and sewage disposal systems, storm and sanitary profiles, and, when present or proposed, cross sections, inverts, and top elevations of structures.	<input type="checkbox"/>	<input type="checkbox"/>



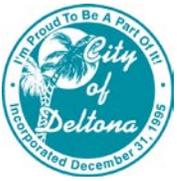
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CONTENT REQUIREMENTS CHECKLIST	Applicant to check if completed	Staff to check if included
7. Electric or gas services <i>(including a commitment from the provider that adequate electric or gas service, where appropriate, will be available prior to issuance of the Development Order)</i>	<input type="checkbox"/>	<input type="checkbox"/>
8. Streets: a) Rights-of-way b) Pavement widths c) Grades and elevations d) Street names e) Plans f) Profiles g) Cross-sections <i>(when requested by the City Engineer)</i> h) Center line dimensions i) Scalar block and lot layouts j) Lot and block numbers	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
9. Other rights-of-way or easements, including locations, dimensions, and purposes	<input type="checkbox"/>	<input type="checkbox"/>
10. Contour changes, dikes or any created water bodies or changed watercourses	<input type="checkbox"/>	<input type="checkbox"/>
11. Bulkheads and bridges	<input type="checkbox"/>	<input type="checkbox"/>
12. Parks, school sites, common areas, and other public uses (if any)	<input type="checkbox"/>	<input type="checkbox"/>
13. Areas reserved for natural resources protection, conservation easements, tree protection areas, open space, etc. <i>(Natural and/or preservation areas shall not be used for stormwater management)</i>	<input type="checkbox"/>	<input type="checkbox"/>
14. Surface drainage patterns with direction of flow	<input type="checkbox"/>	<input type="checkbox"/>
15. Stormwater management and Best Management Practices during construction to include: a) Location, type, and description of all proposed erosion and sedimentation controls <i>(i.e. silt fences, synthetic hay bales, etc.)</i> b) Fuel storage areas c) Concrete washout areas	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>



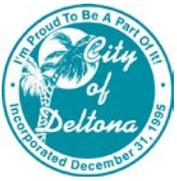
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CONTENT REQUIREMENTS CHECKLIST	Applicant to check if completed	Staff to check if included
d) Temporary construction entrance and fire apparatus access roadway details	<input type="checkbox"/>	<input type="checkbox"/>
e) Areas where construction waste and material storage have the potential to impact stormwater runoff	<input type="checkbox"/>	<input type="checkbox"/>
f) Dewatering areas and the associated discharge points with turbidity limits	<input type="checkbox"/>	<input type="checkbox"/>
g) For proposed developments greater than or equal to one acre or developments less than one acre that are part of a larger common plan of development, a draft or final copy (if applicable) of the site construction generic permit (CGP) notice of intent (NOI), to be submitted to the City.	<input type="checkbox"/>	<input type="checkbox"/>
16. Any deed restrictions, protective covenants, homeowner association/property owner association documents for the subdivision and any other information deemed necessary by either the applicant or the Development Review Committee	<input type="checkbox"/>	<input type="checkbox"/>
17. Other information, as deemed necessary by the City	<input type="checkbox"/>	<input type="checkbox"/>
E. FIRE HYDRANTS		
1. Fire hydrants shall meet or exceed AWWA C502, latest revision, and shall comply with Factory Mutual Research Corp. and Underwriters Laboratories UL 246 Standard.	<input type="checkbox"/>	<input type="checkbox"/>
2. Rated working pressure shall be 200 psi	<input type="checkbox"/>	<input type="checkbox"/>
3. Test pressure shall be 400 psi	<input type="checkbox"/>	<input type="checkbox"/>
4. Hydrants shall include the following specific design criteria:	<input type="checkbox"/>	<input type="checkbox"/>
a) Main valve closure shall be of the compression type.	<input type="checkbox"/>	<input type="checkbox"/>
b) Traffic feature to be designed for easy 360 degree rotation of nozzle section during field installation.	<input type="checkbox"/>	<input type="checkbox"/>
c) Main valve opening shall not be less than 5 ¼" and be designed so that removal of all working parts can be accomplished without excavating.	<input type="checkbox"/>	<input type="checkbox"/>
d) Bronze seat shall be threaded into mating threads of bronze.	<input type="checkbox"/>	<input type="checkbox"/>
e) Draining system of the hydrant shall be bronze and positively activated by the main operating rod.	<input type="checkbox"/>	<input type="checkbox"/>
f) Hydrant drains shall close completely after no more than three turns of the operating nut.	<input type="checkbox"/>	<input type="checkbox"/>



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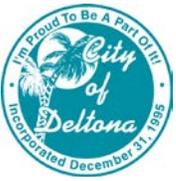
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CONTENT REQUIREMENTS CHECKLIST		Applicant to check if completed	Staff to check if included
	g) Minimum of two (2) internal ports and four (4) drain port outlets to the exterior of the hydrant.	<input type="checkbox"/>	<input type="checkbox"/>
	h) Two (2) 2 ½" and one (1) 4 ½" fire department connection ports.	<input type="checkbox"/>	<input type="checkbox"/>
	i) Drain shutoff to be direct compression closure.	<input type="checkbox"/>	<input type="checkbox"/>
	j) Include cap chains and plugged weep holes.	<input type="checkbox"/>	<input type="checkbox"/>
	k) Friction loss not to exceed 3.0 psi at 100 gpm through 4 ½" pumper nozzle.	<input type="checkbox"/>	<input type="checkbox"/>
	l) Hydrants shall be equal to American Flow Control's American Darling B-84-B.	<input type="checkbox"/>	<input type="checkbox"/>
	m) All hydrants shall be yellow color.	<input type="checkbox"/>	<input type="checkbox"/>
5.	Main Size: Residential: minimum six (6) inches; Commercial developments: minimum eight (8) inches	<input type="checkbox"/>	<input type="checkbox"/>
6.	Location: 300 feet of a commercial structure either existing or new installation, or 500 feet in new residential subdivisions (greatest distance to a house shall be 250 feet)	<input type="checkbox"/>	<input type="checkbox"/>

Fire Hydrant: *Underground inspections shall require a visual inspection of all connections, thrust blocks, tie rods, and pipe. If a fire hydrant is required to be installed for this project, it shall be installed, operational and approved by the Deltona Fire Safety Manager prior to any combustible construction materials being brought on site and before vertical construction will be allowed to begin. Do not back fill the fire hydrant without the fire inspectors on site approval. The engineer of record shall provide certification that the water distribution system meets the required flow at 20 psi before building final. Any Changes to the approved plans or equipment shall be pre-approved by the Fire Safety Manager and as built drawings submitted prior to final inspection.*

Please Note: *Additional information may be required.*



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NOTARIZED AUTHORIZATION OF OWNER

I/We _____ as the

Print Owner's Name(s)

sole or joint fee simple title holder(s) of the property described as (property address, parcel number, and legal description): _____

_____ **authorize**

_____ **to act as my agent** to seek a (select one)

(Print Agent's Name)

Site Plan; Plat; Rezoning; Conditional Use; Variance, or other _____, on the above referenced property.

Owner's Signature

Owner's Signature

Print or type name

Print or type name

Date

Date

STATE OF FLORIDA, COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me this ____ day of _____, 20__, by _____, who is personally known to me or who has produced _____ as identification and who (did/did not) take an oath.

Signature of Notary Public – State of Florida

Print or type name

Date

(Notary Seal or Stamp)



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NON-CONCURRENCY AFFIDAVIT

I. PROJECT INFORMATION:

Located on County Road? Yes No

Project Name: _____
Address or location of Property: _____
Tax Parcel Number (s): _____
Gross Acres: _____ Number of Lots: _____ Zoning: _____
Owner's Name (s): _____
Owner's Mailing Address: _____
City/State/Zip Code: _____
Phone: _____ E-mail: _____

(Please attach list of properties if multiple parcels and/or owners)

II. The undersigned hereby declares and affirms that he/she is the owner or developer with permission of the owner of the property, which is the subject of this affidavit.

Further, the undersigned declares and affirms that he/she has hereby elected to defer the Concurrency determination that is required by Chapter 86, City of Deltona, Land Development Code, as amended and Chapter 163, Florida Statutes, for the subject property until a later time, but not later than the first application for a Final Development Order for the subject property.

Further, the undersigned understands and acknowledges that the subject property will require a Concurrency determination and must be issued a Concurrency Certificate of Capacity before any Final Development Order can be issued, and that a Concurrency Certificate of Capacity may not be approved at a later time, in which case the subject property cannot be developed until sufficient capacity of public facilities becomes available to maintain the standards for levels of services that are adopted in the City of Deltona Comprehensive Plan and Chapter 86, City of Deltona, Land Development Code, as amended.

Applicant's Name: _____

Applicant's Status: Owner Developer Attorney for Owner Agent for Owner Other _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ E-mail: _____

Applicant's Signature: _____ Date: _____

STATE OF FLORIDA, COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me this ____ day of _____, 20__, by _____, who is personally known to me or who has produced _____ as identification and who (did/did not) take an oath.

Signature of Notary Public – State of Florida

Print or type name

Date

(Notary Seal or Stamp)



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**TREE REMOVAL PERMIT APPLICATION
SUBMITTAL CHECKLIST**

(Return this checklist with application)

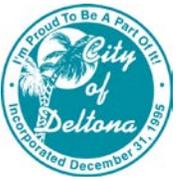
The applicant is responsible for submitting all information and exhibits in such form and completeness that will allow all reviewers to judge whether or not the subject application complies with all applicable regulations.

Project Name: _____

Address or location of Property: _____

REQUIRED MATERIALS	Applicant to check if completed	Public Works' Staff to check if included
1. Application <i>(completed and signed)</i>	<input type="checkbox"/>	<input type="checkbox"/>
2. Two (2) copies Tree Survey with trees by location, common name, and DBH <i>(recommended Scale 1" = 20')</i> .	<input type="checkbox"/>	<input type="checkbox"/>
3. Existing trees to be removed, to be relocated, or to be retained	<input type="checkbox"/>	<input type="checkbox"/>
4. Trees to be maintained requiring protection	<input type="checkbox"/>	<input type="checkbox"/>
5. Detail of and method of protection	<input type="checkbox"/>	<input type="checkbox"/>
6. If not already on Site Plan, identify natural vegetation retention areas and tree protection areas	<input type="checkbox"/>	<input type="checkbox"/>
7. Trees to be maintained	<input type="checkbox"/>	<input type="checkbox"/>
8. Replacement stock to be planted	<input type="checkbox"/>	<input type="checkbox"/>
9. Removal and replacement calculations	<input type="checkbox"/>	<input type="checkbox"/>
10. Identification of Historic and Specimen trees	<input type="checkbox"/>	<input type="checkbox"/>
11. Reason for removal if not concurrent with FSP	<input type="checkbox"/>	<input type="checkbox"/>
12. Existing and proposed utility easements	<input type="checkbox"/>	<input type="checkbox"/>
13. Existing and proposed site improvements	<input type="checkbox"/>	<input type="checkbox"/>
14. Scale, North Arrow, and Legend	<input type="checkbox"/>	<input type="checkbox"/>
15. Application fees <i>(\$350.00 plus consulting fees) (this is a permit fee and is exclusive of any fees owed to the City Tree Replacement Fund at \$18.04 of CSSI)</i>	<input type="checkbox"/>	<input type="checkbox"/>

Please Note: Additional information may be required.



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APPLICATION FOR TREE REMOVAL PERMIT

I. TYPE OF TREE REMOVAL APPLICATION *(Check one)*

- Concurrent with Final Site Plan/Development Order *(Land Development Code, Section 98-29(a)(1))*
- Without Development Order Review *(Land Development Code, Section 98-29(a)(2))*
- In Connection with Building or Related Improvements *(Land Development Code, Section 98-29(a)(4))*

II. PROJECT INFORMATION

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: _____

III. PROPERTY OWNER INFORMATION

Owner's Name (s): _____

Owners Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ E-mail: _____

IV. APPLICANT/DEVELOPER INFORMATION

Applicant/Developer's Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ Fax: _____ E-mail: _____

_____ Applicant's Signature	_____ Print Name	_____ Date
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FOR OFFICE USE ONLY <i>(Do NOT write in this box)</i>		
\$ _____ APPLICATION FEE	<input type="checkbox"/> Check No. _____ <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card	_____ PROJECT NO. _____ APPLICATION RECEIVED BY _____ DATE