

# SEMINOLE COUNTY, FLORIDA

**APPLICATION FOR CONCURRENCY REVIEW**  
*(IN CONJUNCTION WITH R-O-W USE PERMITS ONLY)*  
**[SUBMIT TO ENGINEERING DIVISION – APPLICATION FEE IS \$65.00 OR \$260.00]**

**1) APPLICANT INFORMATION:**

Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Telephone No.: \_\_\_\_\_  
 Fax No.: \_\_\_\_\_

**2) OWNER INFORMATION:**

Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Telephone No.: \_\_\_\_\_  
 Fax No.: \_\_\_\_\_

**3) PROJECT INFORMATION:**

Property address/location: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**4) Tax parcel identification number(s) of all property included in this proposal Request:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**5) Project Name:**

\_\_\_\_\_  
 \_\_\_\_\_

**6) This proposal:**

- |  |  |
|--|--|
| <input type="checkbox"/> Is for new development/construction | <input type="checkbox"/> Is for construction of an expansion |
| <input type="checkbox"/> Replaces a current use of a _____   | <input type="checkbox"/> Replaces a past use of a _____      |

**7) A Signed and Sealed Traffic Impact Study is:**

ATTACHED: Study prepared pursuant to previous methodology review meeting with the County Engineer.

NOT REQUIRED: This application is specifically for: (Check only one of the following).

**Land uses which require a traffic study regardless of size are convenience stores, gasoline stations, banks, and fast food restaurants.**

DESCRIPTION	SIZE THRESHOLDS	DESCRIPTION	SIZE THRESHOLDS
<input type="checkbox"/> Single-Family d/u	<50 Dwelling Units	<input type="checkbox"/> Church	<75,000 sq. ft.
<input type="checkbox"/> Apartment	<100 Dwelling Units	<input type="checkbox"/> Daycare	<4,000 sq. ft.
<input type="checkbox"/> Condominium and Duplex	<100 Dwelling Units	<input type="checkbox"/> Resident Care, Group/Nursing Home	<226 Beds
<input type="checkbox"/> Mobile Home	<100 Dwelling Units	<input type="checkbox"/> General Office	<35,000 sq. ft.
<input type="checkbox"/> Hotel	<100 Rooms	<input type="checkbox"/> Medical Office / Vet Clinics	<15,000 sq. ft.
<input type="checkbox"/> Quality Restaurant	<7,500 sq. ft.	<input type="checkbox"/> Shopping Center	<10,000 sq. ft.
<input type="checkbox"/> High Turnover Restaurant (sit-down)	<5,000 sq. ft.	<input type="checkbox"/> Warehousing	<100,000 sq. ft.
<input type="checkbox"/> Furniture Store	<125,000 sq. ft.	<input type="checkbox"/> Manufacturing	<75,000 sq. ft.
<input type="checkbox"/> New Car Sales	<20,000 sq. ft.	<input type="checkbox"/> Mini-Warehouse	<200,000 sq. ft.

8) **Utility Service Provision:**

a) **Water Service (Utility Provider):** \_\_\_\_\_  or Not Served

b) **Sewer Service (Utility Provider):** \_\_\_\_\_  or Not Served

9) **A Water and Sewer Demand Estimate (if served by Seminole County) prepared by a Certified Engineer is :**

ATTACHED:

NOT INCLUDED: I understand that Seminole County will make an estimate of water and sewer demand based upon the information in this application, but that I am solely responsible for assuring the accuracy of demand calculations for purpose of paying connection fees. If sufficient data to perform an accurate demand calculation is not provided, applicant's engineer will need to meet with the County Environmental Services Division prior to completing a utility agreement and payment of fees to determine a final demand calculation.

10) **PROJECT SIZE AND PHASING:** Below, clearly identify past or existing uses or structures, if applicable, and proposed new development / construction. Credit for prior uses can only be given if the information is clear and complete. *(Note: Sizes, types, and number of units as filled out below and as indicated on the plans will be assumed as maximums for estimating project demand, and the Certificate of Concurrency will be conditioned upon and only valid for such maximums provided on this application.)*

PHASE Number of Phases (if applicable)	NUMBER OF ACRES	SPECIFIC USE(S)	BUILDING GROSS SQUARE FEET or NUMBER OF UNITS/LOTS
<i>Example:</i> Phase I	15	Single Family	95 Units

13) **CERTIFICATION AND SIGNATURE:**

I hereby certify that the information contained herein is true and correct and that I am either the true and sole owner of the subject property, or am authorized to act on behalf of the true owner(s) in all regards on this matter, pursuant to proof and authorization submitted with the corresponding development application or attached hereto. I hereby represent that I have the lawful right and authority to file this application.

I understand that submission of the form initiates a process and does not imply approval by Seminole County. I further understand that issuance of a Certificate of Concurrency will require successful completion of Development Review and payment of Facility Reservation Fees, and that likewise no final development order will be issued except upon successful completion of this Concurrency Review. I further understand that "Inquiry Only" Review will result in no Certificate of Concurrency being issued, and therefore no binding assurance of future capacity, and that a new Concurrency Review application will be required in conjunction with the first final development order applies for on this property.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTICE: PLEASE BE SURE TO FILL IN ALL BLANKS AND PROVIDE ALL INFORMATION (ATTACH ADDITIONAL SHEETS IF NECESSARY). INCOMPLETE / INADEQUATE INFORMATION WILL RESULT IN DELAY OF REVIEW. YOUR COOPERATION IS APPRECIATED.**

**FILING OF APPLICATION:**

File this Application, along with your R-O-W Use Application to:

Engineering Division  
Attention: Permit Coordinator  
520 West Lake Mary Boulevard, Suite 200  
Sanford, Florida 32773  
Phone: (407) 665-5663

The appropriate application fee must be paid at the time of filing (\$65.00 or \$260.00). Please contact Mary Long at (407) 665-7474 for determination of applicable fee amount. The County will review all applications for completeness. If an application is found to be incomplete, the applicant will be notified that the application is incomplete. Processing of a Concurrency Application and the related Right-of-Way Application will not begin until both are complete.

**PLANNING AND DEVELOPMENT USE ONLY**

- 14) Current Zoning: \_\_\_\_\_
- 15) Development Application (DRS) Identifying #: \_\_\_\_\_
- 16) Application for Development Order Specified in Question #6 determined to be complete:  
Date: \_\_\_\_\_ Time: \_\_\_\_\_
- 17) One copy of Development Application and Supporting Submission is attached.
- 18) Development Application (if applicable) routed to begin Development Review **and** this Concurrency Application with required attachments including plans, routed to the attention of \_\_ in Development Review.  
Date: \_\_\_\_\_ By: \_\_\_\_\_  
Time: \_\_\_\_\_ Receipt # \_\_\_\_\_

**FOR DEVELOPMENT REVIEW USE ONLY**

- 19) CONTROL NUMBER ASSIGNED: \_\_\_\_\_  
TRAFFIC ZONE: \_\_\_\_\_  
FUTURE LAND USE DESIGNATION:  
 PLANS ATTACHED       LEGAL DESCRIPTION ATTACHED       TIS ATTACHED