



SEMINOLE COUNTY
PLANNING & DEVELOPMENT DIVISION
 1101 EAST FIRST STREET, ROOM 2028
 SANFORD, FLORIDA 32771
 PHONE: (407) 665-7441 FAX: (407) 665-7385
<http://www.seminolecountyfl.gov/gm/devrev/DevelopmentProcesses.aspx>

PROJECT #: _____
 Z #: _____
 LUA #: _____

REZONE/FUTURE LAND USE AMENDMENT

ALL INFORMATION MUST BE PROVIDED FOR APPLICATION TO BE CONSIDERED COMPLETE

PROJECT

PROJECT NAME:	
PARCEL ID #(S):	
LOCATION:	
EXISTING USE(S):	PROPOSED USE(S):
TOTAL ACREAGE:	BCC DISTRICT:
WATER PROVIDER:	SEWER PROVIDER:
CURRENT ZONING:	PROPOSED ZONING:
CURRENT FUTURE LAND USE:	PROPOSED FUTURE LAND USE:

APPLICANT

EPLAN PRIVILEGES: VIEW ONLY UPLOAD NONE

NAME:	COMPANY:	
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE:	EMAIL:	

CONSULTANT

EPLAN PRIVILEGES: VIEW ONLY UPLOAD NONE

NAME:	COMPANY:	
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE:	EMAIL:	

OWNER(S)

(INCLUDE NOTARIZED OWNER'S AUTHORIZATION FORM)

NAME(S):		
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE:	EMAIL:	

APPLICATION TYPE(S)/FEE(S)

<input type="checkbox"/> LARGE SCALE FUTURE LAND USE AMENDMENT (>10 ACRES)	\$350/ACRE* (\$10,000 MAX. FEE)
<input type="checkbox"/> LARGE SCALE FLU AMENDMENT <u>AND</u> REZONE (>10 ACRES)	\$350/ACRE* (\$10,000 MAX. FEE) + 50% OF REZONE FEE (AS CALCULATED BELOW)
<input type="checkbox"/> SMALL SCALE FUTURE LAND USE AMENDMENT (≤10 ACRES)	\$3,000
<input type="checkbox"/> SMALL SCALE FLU AMENDMENT <u>AND</u> REZONE (≤10 ACRES)	\$3,000 + 50% OF REZONE FEE (AS CALCULATED BELOW)
<input type="checkbox"/> REZONE (NON-PD)**	
<input type="checkbox"/> SINGLE FAMILY/DUPLEX/AGRICULTURE	\$2,000 + \$75/ACRE* (\$3,500 MAX. FEE)
<input type="checkbox"/> ALL OTHER CLASSIFICATIONS	\$2,500 + \$75/ACRE* (\$4,500 MAX. FEE)
<input type="checkbox"/> REZONE (PD)**	
<input type="checkbox"/> REZONE AND MASTER DEVELOPMENT PLAN	\$3,500 + \$75/ACRE* (\$8,000 MAX. FEE)
<input type="checkbox"/> FINAL DEVELOPMENT PLAN	\$1,000
<input type="checkbox"/> FINAL DEVELOPMENT PLAN AS AN ENGINEERED SITE PLAN <small>(INCLUDES 2 RESUBMITTALS. ADDITIONAL RESUBMITTALS ARE SUBJECT TO ADDITIONAL FEES.)</small>	\$2,000 + \$25/1,000 SQ. FT. OF IMPERVIOUS (\$8,500 MAX. FEE)
<input type="checkbox"/> MAJOR AMENDMENT	\$3,500 + \$75/ACRE*^ (\$8,000 MAX. FEE)
<input type="checkbox"/> MINOR AMENDMENT	\$1,000
<input type="checkbox"/> DEVELOPMENT OF REGIONAL IMPACT (DRI)	
<input type="checkbox"/> DETERMINATION OF SUBSTANTIAL DEVIATION (OR OTHER CHANGE)	\$3,500.00

* ALL PER ACRE FEES ARE ROUNDED UP TO THE NEAREST FULL ACRE
 ** 50% OF REZONE FEE IF REZONE IS CONCURRENT WITH A LAND USE AMENDMENT
 ^ ACREAGE IS CALCULATED FOR THE AFFECTED AREA ONLY

ATTACHMENT CHECKLIST

HARCOPY SUBMITTAL

- APPLICATION
- APPLICATION FEE
- PROPERTY APPRAISER'S PROPERTY CARD PRINTOUT
- OWNERSHIP DISCLOSURE FORM (ADD'L DOCUMENTATION REQUIRED IF OWNER IS A TRUST OR CORPORATION)
- OWNER'S AUTHORIZATION FORM, IF APPLICABLE (ADD'L DOCUMENTATION REQUIRED IF OWNER IS A TRUST OR CORPORATION)
- CONCURRENCY APPLICATION OR DEFERRAL AFFIDAVIT AND FEE, IF APPLICABLE
- COPY OF PRE-APPLICATION COMMENTS, IF APPLICABLE

E-PLAN UPLOAD

- SCHOOL IMPACT ANALYSIS (CONTACT SCHOOL BOARD FOR APPLICATION)
- BOUNDARY SURVEY
- LEGAL DESCRIPTION IN MS WORD FORMAT
- APPROVED TRAFFIC METHADODOLOGY LETTER FROM PUBLIC WORKS ENGINEERING DIVISION, IF APPLICABLE
- ATTACHMENT "A" AND ALL SUPPORTING DOCUMENTS (LAND USE AMENDMENTS ONLY)
- TRAFFIC IMPACT ANALYSIS (PROJECTS GENERATING 50 OR MORE PEAK HOUR TRIPS)
- DRAFT DEVELOPER'S COMMITMENT AGREEMENT IN MS WORD FORMAT (FINAL DEVELOPMENT PLAN ONLY)
- DRAFT DEVELOPMENT ORDER IN MS WORD FORMAT (REZONE TO PD, OP, RP, RM-2, RM-3, R-3, R-3A, R-4 AND MYRTLE ST)
- MASTER DEVELOPMENT PLAN INCLUDING A PUBLIC FACILITIES AND SERVICES ANALYSIS SUMMARY SHOWN ON THE PLAN IN A TABLE WITH SUPPORTING DATA PROVIDED SEPARATELY (PD MASTER DEVELOPMENT PLAN ONLY)

CONCURRENCY REVIEW MANAGEMENT SYSTEM (SELECT ONE)

I elect to defer the Concurrency Review that is required by Chapter 163, Florida Statutes, per Seminole County's Comprehensive Plan for the above listed property until a point as late as Site Plan and/or Final Engineering submittals for this proposed development plan. I further specifically acknowledge that any proposed development on the subject property will be required to undergo Concurrency Review and meet all Concurrency requirements in the future. PD Final Site Plan/PD Final Site Plan Amendment may not defer.

I hereby declare and assert that the aforementioned proposal and property described are covered by a valid previously issued Certificate of Vesting or a prior Concurrency determination (Test Notice issued within the past two years as identified below. (Please attach a copy of the Certificate of Vesting or Test Notice.)

TYPE OF CERTIFICATE

CERTIFICATE NUMBER

DATE ISSUED

VESTING: _____

TEST NOTICE: _____

Concurrency Application and appropriate fee are attached. I wish to encumber capacity at an early point in the development process and understand that only upon approval of the Development Order and the full payment of applicable facility reservation fees is a Certificate of Concurrency issued and entered into the Concurrency Management monitoring system.

By my signature hereto, I do hereby certify that the information contained in this application is true and correct to the best of my knowledge, and understand that deliberate misrepresentation of such information may be grounds for denial or reversal of the application and/or revocation of any approval based upon this application.

I hereby authorize County staff to enter upon the subject property at any reasonable time for the purposes of investigating and reviewing this request. I also hereby agree to place a public notice sign (placard), if required, on the subject property at a location(s) to be determined by County staff.

I further acknowledge that Seminole County may not defend any challenge to my proposed Future Land Use Amendment/Rezoning and related development approvals, and that it may be my sole obligation to defend any and all actions and approvals, which authorize the use or development of the subject property. Submission of this form initiates a process and does not imply approval by Seminole County or any of its boards, commissions or staff.

I further acknowledge that I have read the information contained in this application pertaining to proposed amendments to the official Zoning map, official Future Land Use map and/or Comprehensive Plan and have had sufficient opportunity to inquire with regard to matters set forth therein and, accordingly, understand all applicable procedures and matters relating to this application.

I hereby represent that I have the lawful right and authority to file this application.

SIGNATURE OF AUTHORIZED APPLICANT
(PROOF OF PROPERTY OWNER'S AUTHORIZATION IS REQUIRED WITH SUBMITTAL IF SIGNED BY SOMEONE OTHER THAN THE PROPERTY OWNER)

DATE

PRINT OR TYPE NAME

SEMINOLE COUNTY
APPLICATION & AFFIDAVIT

Ownership Disclosure Form

The owner of the real property associated with this application is a (check one)

- Individual Corporation Land Trust
 Limited Liability Company Partnership
 Other (describe): _____

1. List all **natural persons** who have an ownership interest in the property, which is the subject matter of this petition, by name and address.

NAME	ADDRESS	PHONE NUMBER

(Use additional sheets for more space.)

2. For each **corporation**, list the name, address, and title of each officer; the name and address of each director of the corporation; and the name and address of each shareholder who owns two percent (2%) or more of the stock of the corporation. Shareholders need not be disclosed if a corporation's stock are traded publicly on any national stock exchange.

NAME	TITLE OR OFFICE	ADDRESS	% OF INTEREST

(Use additional sheets for more space.)

3. In the case of a **trust**, list the name and address of each trustee and the name and address of the beneficiaries of the trust and the percentage of interest of each beneficiary. If any trustee or beneficiary of a trust is a corporation, please provide the information required in paragraph 2 above.

Trust Name: _____

NAME	TRUSTEE OR BENEFICIARY	ADDRESS	% OF INTEREST

(Use additional sheets for more space.)

4. For **partnerships**, including limited partnerships, list the name and address of each principal in the partnership, including general or limited partners. If any partner is a corporation, please provide the information required in paragraph 2 above.

NAME	ADDRESS	% OF INTEREST

(Use additional sheets for more space.)

5. For each **limited liability company**, list the name, address, and title of each manager or managing member; and the name and address of each additional member with two percent (2%) or more membership interest. If any member with two percent (2%) or more membership interest, manager, or managing member is a corporation, trust or partnership, please provide the information required in paragraphs 2, 3 and/or 4 above.

Name of LLC: _____

NAME	TITLE	ADDRESS	% OF INTEREST

(Use additional sheets for more space.)

6. In the circumstances of a **contract for purchase**, list the name and address of each contract purchaser. If the purchaser is a corporation, trust, partnership, or LLC, provide the information required for those entities in paragraphs 2, 3, 4 and/or 5 above.

Name of Purchaser: _____

NAME	ADDRESS	% OF INTEREST

Date of Contract: _____

Please specify any contingency clause related to the outcome of the consideration of the application.

6. As to any type of owner referred to above, a change of ownership occurring subsequent to this application, shall be disclosed in writing to the Planning and Development Director prior to the date of the public hearing on the application.

7. I affirm that the above representations are true and are based upon my personal knowledge and belief after all reasonable inquiry. I understand that any failure to make mandated disclosures is grounds for the subject rezoning, future land use amendment, special exception, or variance involved with this Application to become void. I certify that I am legally authorized to execute this Application and Affidavit and to bind the Applicant to the disclosures herein.

Date

Owner, Agent, Applicant Signature

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by _____, on this ____ day
of _____, 20____. Owner, Agent, Applicant Name

Signature of Notary Public

Print, Type or Stamp Name of Notary Public

Personally Known _____ OR Produced Identification _____

Type of Identification Produced _____

SEMINOLE COUNTY APPLICANT AUTHORIZATION FORM

(ORIGINAL ONLY)

An authorized applicant is defined as:

- The property owner of record; or
- An agent of said property owner (power of attorney to represent and bind the property owner must be submitted with the application); or
- Contract purchaser (a copy of a fully executed sales contract must be submitted with the application containing a clause or clauses allowing an application to be filed).

I, _____, the owner of record for the following described property

(Legal Description or Tax/Parcel ID Number) _____

hereby affirms that _____ is hereby designated to act as my

authorized agent for the filing of the attached application for a: **(CHECK ONE)**

<input type="checkbox"/>	Arbor Permit	<input type="checkbox"/>	Special Exception	<input type="checkbox"/>	Temporary Use Permit	<input type="checkbox"/>	Variance
<input type="checkbox"/>	Development Plan	<input type="checkbox"/>	Special Event Permit	<input type="checkbox"/>	Vacate	<input type="checkbox"/>	OTHER

and make binding statements and commitments regarding the request. I certify that I have examined the attached application and that all statements and diagrams submitted are true and accurate to the best of my knowledge. Further, I understand that this application, attachments and fees become part of the Official Records of Seminole County, Florida and are not returnable.

DATE

Owner's Signature

Owner's Name

STATE OF FLORIDA
COUNTY OF _____

SWORN TO AND SUBSCRIBED before me, an officer duly authorized in the State of Florida to take acknowledgements, personally appeared _____, who is personally known to me or who has produced a _____ as identification and who executed the foregoing instrument and sworn an oath on this _____ day of _____, 20____.

NOTARY PUBLIC

Summary of Traffic Study Requirements for Site Impact Analysis (Projects in the TCEA/DULA)

Step 1 – Determine whether or not a traffic study is required based on the following thresholds (The radius shall be measured from perimeter of the site). For uses not listed below, traffic studies will be required for any site that generates more than 50 new peak hour trips (50 new peak hour trips for all Land Use Change/PD Rezone). Traffic studies shall be required for all small high generators (i.e., convenience stores, gasoline stations, fast food restaurants, banks, etc). If a study is required, proceed to step 2.

Land Use	Unit	N.A.	Radius of influence	Radius of influence
		Traffic Study Not Required	¼ mile	½ mile
<i>Residential – Single-Family</i>	DU	0 - 50	51 - 500	
<i>Residential – Apartments</i>	DU	0 - 100	101- 800	
<i>Residential – Condos</i>	DU	0 - 100	101- 1,000	
<i>Residential – Mobil Homes</i>	DU	0 - 100	101- 1,000	
<i>Hotel</i>	Room	0 - 100	101- 800	
<i>Church</i>	TSF	0 – 75,000	> 75,000	
<i>Daycare</i>	TSF	0 – 4,000	> 4,000	
<i>Office: General</i>	TSF	0 – 35,000	35,001 – 350,000	
<i>Office: Medical</i>	TSF	0 – 15,000	15,001 – 150,000	
<i>Retail Shopping Center</i>	TSF	0 – 10,000	10,001 – 135,000	
<i>Quality Restaurant</i>	TSF	0 – 7,500	> 7,500	
<i>High Turnover Restaurant</i>	TSF	0 – 5,000	> 5,000	
<i>New Car Sales</i>	TSF	0 – 20,000	> 20,000	
<i>Furniture Store</i>	TSF	0 – 125,000	> 125,000	
<i>Industrial - Manufacturing</i>	TSF	0 – 75,000	75,0001 – 750,000	
<i>Industrial - Warehouse</i>	TSF	0 – 100,000	100,001 – 1,000,000	
<i>Industrial – Mini-Warehouse</i>	TSF	0 – 200,000	> 200,000	
<i>* PD Rezone/ Land Use Change</i>	TSF/ DU	1 - 50	50 – 499	> 500

*Radius of influence for Land Use Change/PD Rezone may be extended if known operational deficiencies existed pre-development.

Step 2 – Submit a traffic study methodology that contains the following information:

- ⇒ Location map of the site.
- ⇒ Summary of the proposed trip generation including any proposed pass-by trips and internal trip capture.
- ⇒ Proposed trip distribution to 1 mile or *2 mile(s) from main access point, which should include backup calculations.
- ⇒ List of arterial and collector roadways that fall within a 1 mile radius of influence or 2 mile for any Land Use Change/PD Rezone with peak hour trips greater than 500.
- ⇒ List of signalized intersections and major un-signalized intersections that fall within the radius of influence (see threshold above).
- ⇒ Site plan of the proposed development that shows the proposed access locations.

The methodology should be submitted for approval by email, or regular mail to:

Tony Nelson, P.E.
Principal Engineer, Engineering Division
Seminole County Public Works Department
100 E 1st Street
Sanford, FL 32771
Office 407-665-5763
Fax 407-665-5786
ANelson@seminolecountyfl.gov

Step 3 – Once the methodology has been approved, existing traffic counts and committed trip information will be provided to the applicant if available. A traffic impact analysis study will then need to be submitted that contains the following information:

- ⇒ A detailed trip generation summary including any applicable pass-by trips and internal capture. For internal capture, please submit backup calculations.
- ⇒ A map showing the trip distribution percentages on each of the links in the study area.
- ⇒ A table summarizing the daily trip impacts on all roadway links. For each roadway link in the study area, the table should include project distribution percentages, development trips, existing traffic counts, committed trips, total future traffic counts and Level of Service (LOS).
- ⇒ The LOS of roadway segments do not need to meet the accepted standard since the project is located in the DULA. The calculations are used for tracking and future committed trip distribution.
- ⇒ A table summarizing the peak hour operations of the intersections. Highway Capacity Software (HCS) analysis or equivalent should be included as backup information in the report. All movements of an intersection must be LOS E or better.
- ⇒ The traffic study must be signed and sealed by a registered Professional Engineer.

Two signed and sealed hard copies of the Traffic Impact Analysis Study will need to be submitted along with the Concurrency Application or prior to the Land Use Change and PD Rezone approval. The studies should NOT be submitted directly to Tony Nelson but follow the standard application process.

For any questions regarding this process, please feel free to contact Tony Nelson at 407-665-5763.