



CITY OF DAVENPORT

1 South Allapaha Ave - Davenport, FL 33837
Telephone (863) 419-3300 - Fax (863) 216-5634

Impact Statement Application

City Use Only:

Referenced Case Number (If associated with another application): _____

The following information is required for submission of an application for an **Impact Statement Review** of property in the City Limits of Davenport, Florida. Please print or type the required information below. **The Applicant shall adequately address the standards listed in Article 9 Impact Statement, Section 9.09.00 to 9.09.06 of the Land Development Regulations including an aerial photograph, property appraiser's parcel map, site plan to scale and location map. Specific attention shall be paid to Section 9.09.05 General Information Required for Impact Statement and Section 9.09.06 Specific Information Required for the Impact Statement.**

APPLICANT

Name of Property Owner(s): _____

Mailing Address: _____

Phone/Fax: _____ E-mail address: _____

Name of Agent, if applicable: _____

Mailing Address: _____

Phone/Fax: _____ E-mail address: _____

Reason for Impact Statement Review: _____

PROPERTY IDENTIFICATION

Property Address or General Location: _____

Present Use of the Property: _____

Existing Structures Located on the Site: _____

Total Acreage: _____ Square Footage: _____

Number of Residents on Site: _____

Parcel I.D.#: _____

Legal Description of the Property: _____

Subdivision (if any): _____

ZONING AND FUTURE LAND USE DESIGNATION

Current Zoning Classification: _____

Current Future Land Use Classification: _____

Requested City Zoning Classification: _____

Note: For annexed properties without City Zoning, the City will assign designations, which most closely conform with the actual use of the property or with designations of surrounding properties, unless specific zoning designations are requested.

Approval of this application does not waive any other applicable provisions of the City Land Development Regulations, the City Comprehensive Plan or the City Code which are not part of the request for this application, nor does approval waive any applicable Florida Statutes, Florida Administrative Code, or any other applicable laws, rules, or ordinances, whether federal, state or local. The applicant has the obligation and responsibility to be informed of and be in compliance with all applicable laws, rules, codes and ordinances.

I, _____ (print name), the applicant or property owner which is the subject of this application, or the authorized representative of applicant or property owner which is the subject of this application, hereby authorize representatives of the City to enter onto the property which is the subject of this application to perform any inspections or site visits necessary for reviewing this application. I understand that representatives of the City are not authorized to enter any structures dwellings which may be on the property. Applicants, property owners or authorized representatives are here by acknowledging their obligation and responsibility to be informed of and be in compliance with all applicable laws, rules, codes and ordinances.

Applicant, Property Owner or Authorized Representative

Date: _____

City Use Only:

Date Received: _____

Received By: _____

Fee Paid: _____

Date Found Complete: _____

PROPERTY OWNER'S SIGNATURE PAGE

(I) (We), _____ being duly sworn, depose and say that (I) (we) own one or more of the properties involved in this petition and that (I) (we) authorize the City of Davenport to process this **Impact Statement**, in accordance with all adopted City rules and regulations, and in conformance with State law.

Further, the undersigned (has) (have) appointed and (does) (do) appoint as agent(s) to execute any petitions or other documents necessary to affect such petition; and request that you accept the signature of my agent(s) as representing my agreement of all terms and conditions of the approval process:

Further, (I) (we) or any agent or lessee of the subject property authorized by (me) (us) to file this petition, deposes and say that the statements and answers contained in the application and any information attached thereto, present the arguments on behalf of this petition to the best of (my) (our) ability; and that the statements and information referred to above are in all respects true and correct to the best of (my) (our) knowledge and belief.

PROPERTY OWNERS

_____/_____
Owner's Signature/Print Title

_____/_____
Owner's Signature/Print Title

Printed Name of Owner

Printed Name of Owner

PROPERTY OWNER'S NOTARIZATION

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me or who has produced _____ as identification.

My Commission Expires:

Notary Public Signature

AGENT OR LESSEE SIGNATURE

(I) (We), _____ being duly sworn, depose and say that (I) (we) serve as _____ for the owner(s) in _____ (agent or lessee) making this petition and that the owner(s) (has) (have) authorized (me) (us) to act in this capacity.

Further, (I) (we) depose and say that the statements and answers herein contained and other information attached hereto present the arguments on behalf of the petition herein requested to the best of (my) (our) ability and that the statements and information above belief.

AGENT OR LESSEE SIGNATURE

Agent or Lessee's Signature/Print Title

Agent or Lessee's Signature/Print Title

Printed Name of Agent or Lessee

Printed Name of Agent or Lessee

Company Name

Company Name

Company Address

Company Address

AGENT OR LESSEE(S) NOTARIZATION

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me or who has produced _____ as identification.

My Commission Expires:

Notary Public Signature
Expiration Date