



CITY OF DAVENPORT

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

Application for a Preliminary Plat Review

Residential Mixed-Use Non-Residential

City Use Only:

Case Number: _____ PC Date: _____ 2nd Reading Date: _____

The following information is required for submission of an application for assignment of a **Preliminary Plat 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 in Article 10, Sec. 10.01.05 – Preliminary Subdivision Plat (PSP) of the Land Development Regulations including an aerial photograph, property appraisers parcel map and location map. Depending on the size and intensity of the request, the Applicant may be required to submit an Impact Statement in accordance with Article 9.09.00 Impact Statements, 9.09.02 Application, Section 9.09.03 Developments Requiring Impact Statements, 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 Request: _____

PROPERTY IDENTIFICATION

Name of Project: _____

Property Address or General Location: _____

Total Acreage: _____ Square Footage of Buildings: _____

Number of Proposed Units: _____

Parcel I.D.#s: _____

Legal Description of the Property: _____

Zoning and Future Land Use Designation

Current Zoning Classification: _____

Current Future Land Use 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.

Adjacent Properties (Future Land Use Designation, Zoning, Existing Uses)

NORTH: _____

SOUTH: _____

WEST: _____

EAST: _____

Exhibits and other information required with application: Submittal requirements are outlined in Section 10.01.05, to include at minimum:

- A. Name, address, and telephone number of the applicant and the person preparing the plan.
- B. Title block identifying the name and/or title of the proposed subdivision. The name shall not duplicate or closely approximate than name of any other subdivision recorded in the Public Records of Polk County, Florida.
- C. Date, North arrow, and scale.
- D. Layout and dimensions of proposed lots.
- E. Layout of proposed streets.
- F. All existing restrictions on the use of the land, including easements, rights-of-way, jurisdictional wetland areas, either assumed or confirmed.
- G. Future Land Use and Zoning classification.

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 petition for a **Planned Unit Development**, 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 in 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