

Proj. # _____
AR # _____
Date: _____

Development Application

- | | | |
|---|--|--|
| <input type="checkbox"/> Planned Unit Development (PUD) | <input type="checkbox"/> Major Site Plan | <input type="checkbox"/> Master Park Plan |
| <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Major Site Plan Amendment | <input type="checkbox"/> Mining/Operating Permit |
| <input type="checkbox"/> PUD Amendment | <input type="checkbox"/> Minor Site Plan | |
| | <input type="checkbox"/> Minor Site Plan Amendment | |

You have the option to request a Development Review Staff (DRS) meeting or written comments only. Please check which one you would prefer.

DRS meeting requested Written comments only

**** Your project could be eligible for our "Fast Track Process" for green buildings, affordable housing, or targeted industries. If you believe your project is a targeted industry, please contact Dottie Keedy, Director of Economic Growth and Redevelopment at 352-343-9866 to see if your project is eligible. If you are constructing a green building or your development is an affordable housing project, please let us know. ****

-
- Project Name: _____ Alternate Key#: _____
 - Description of proposed development: _____

 - Location of proposed development: _____

 - Owner's Name: _____
Mailing Address: _____
Telephone Number: (____) _____ Fax Number: (____) _____
E-mail: _____
 - Applicant's Name: _____
Mailing Address: _____
Telephone Number: (____) _____ Fax Number: (____) _____
E-mail: _____
 - Developer's Name: _____ Contact Person: _____
Mailing Address: _____
Telephone Number: (____) _____ Fax Number: (____) _____
E-mail: _____
 - Engineering Firm: _____ Contact Person: _____
Mailing Address: _____
Telephone Number: (____) _____ Fax Number: (____) _____
E-mail: _____
 - Has any previous application or variance been filed in connection with this property? Yes No
If yes, please describe the details of the application and case number: _____

OWNER'S AFFIDAVIT

STATE OF FLORIDA

COUNTY OF LAKE

BEFORE ME, the undersigned authority personally appeared _____, who being by me first duly sworn on oath, deposes and says:

- 1. That he/she is the fee-simple owner of the property legally described and attached to this application.
- 2. That he/she desires a Development Approval to accomplish the above desired request, as stated on Page One of this Application.
- 3. That he/she has appointed _____ to act as Agent and/or Applicant in their behalf to accomplish the above.

(Owner's Signature)

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 and who did ___ or did not ___ take an oath.

Notary Public (Signature)

(SEAL)

Print or type Notary Name
Commission (serial) Number _____
My Commission Expires: _____

NOTE:

All Applications shall be signed by the Owner(s) of the Property, or some person duly authorized by the Owner to sign. The authority authorizing such person other than the Owner to sign MUST be attached.

AGENT / APPLICANT'S AFFIDAVIT

STATE OF FLORIDA

COUNTY OF LAKE

BEFORE ME, the undersigned authority personally appeared _____, who being first duly sworn on oath, deposes and says:

- 1. That he/she Affirms and Certifies that he/she understands and will comply with all Ordinances, Regulations, and Provisions of Lake County, and that all statements and diagrams submitted herewith and attached hereto, are true and accurate to the best of their knowledge and belief, and further, that this application and attachments shall become part of the Official Records of Lake County, Florida, and are **Not Returnable**.
- 2. That he/she desires a Development Approval for the use of property as proposed, for the property legally described on this Application.
- 3. That the submittal requirements for this Application, which are attached hereto, have been completed and attached hereto as part of this Application.
- 4. That the sign cards that are posted by the Growth Management Department, on or after the first-working day of the following month, after submittal of this Application, will remain posted until the Public Hearing of the Zoning Board and the Board of County Commissioners. After final determination by the Board of County Commissioners, the sign cards shall be removed and destroyed.

(Agent / Applicant's Signature)

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 and who did ___ or did not _____ take an oath.

Notary Public (Signature)

(SEAL)

Print or type Notary Name

Commission (serial) Number _____

My Commission Expires: _____