



**Development Application  
Forms**

January 2009

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**CITY OF SARASOTA  
DEVELOPMENT APPLICATION**

**Tiered Flat Fees**

The following is a summary of fees applicable to General and Development Applications as adopted by Resolution No. 09R-2110.  
Designate the applications being submitted under the column indicated with a checkmark (✓).

**APPLICATION [PROJECT] NAME:** \_\_\_\_\_

**PROPERTY ADDRESS[ES]:** \_\_\_\_\_

**PARCEL ID NUMBER[S]:** \_\_\_\_\_

PERMIT / DEVELOPMENT REVIEW TYPE	Fees	Escrow*	✓
<b>PRE-APPLICATION FEES:</b>			
-Pre-Application Conference with the Development Review Committee [DRC] -Pre-Application Conference with Staff for TIF Funding Assistance <i>[Note: First Pre-Application Fee credited toward application fee upon submittal]</i>	<b>\$274.00</b>		
<b>APPLICATION FEES:</b>			
Credit for Pre-Application Fee, if applicable	<b>-\$274.00</b>		
Zoning Code Confirmation Letter	<b>\$274.00</b>		
Zoning Code Interpretation Letter	<b>\$603.00</b>		
Adjustment to the Downtown Code – Director of Neighborhood and Development Services Review	<b>\$274.00</b>		
Adjustment to the Downtown Code – Planning Board Review	<b>\$1,645.00</b>	<b>\$500.00</b>	
Annexation (includes Pre-Annexation Agreement)	<b>\$0.00</b>	<b>\$1,500.00</b>	
Boundary Adjustment/Lot Split Review	<b>\$548.00</b>		
Brownfield Designation	<b>\$2,194.00</b>	<b>\$500.00</b>	
Certificates of Appropriateness <i>[Note: Costs for advertising, etc., are billed to the Demolition Fund. No fee is charged as long as funds are available.]</i>	<b>\$0.00</b>		
Community Workshop	<b>\$548.00</b>		
Comprehensive Plan Amendment	<b>\$5,485.00</b>	<b>\$1,500.00</b>	
Development Agreement	<b>\$4,388.00</b>	<b>\$1,500.00</b>	
Encroachment Agreement for Major Encroachments in the Public Right-of-Way	<b>\$1,645.00</b>	<b>\$500.00</b>	
3rd and Subsequent Reviews	<b>\$1,097.00</b>		
“G” Zone Waiver	<b>\$2,194.00</b>	<b>\$1,000.00</b>	
Historic Designation <i>[Note: No fee is charged as long as Demolition funds are available.]</i>	<b>\$0.00</b>		
Off-Site Parking Agreement / Shared Parking Agreement	<b>\$1,097.00</b>	<b>\$500.00</b>	
Proportionate Fair Share Agreement	<b>\$4,388.00</b>	<b>\$1,500.00</b>	
Revocable Sidewalk Café Permit Application (up to two tables) -plus \$50 for each additional table over two	<b>\$274.00</b>		
Revocable Sidewalk Café Permit Annual Renewal (up to two tables) – plus \$25 for each additional table over two	<b>\$274.00</b>		
Provisional Use Permit/ Open Air Market	<b>\$548.00</b>		
Provisional Use Permit Extension	<b>\$274.00</b>		
Street Name Change Request - Plus cost of street name signs	<b>\$548.00</b>		
Regional Activity Center or Urban Central Business District Designation (State Expedited Process)	<b>\$5,485.00</b>	<b>\$1,500.00</b>	
Request to Consider Amendment of Previously Approved Application	<b>\$274.00</b>		
Right-of-Way or Street Vacation	<b>\$2,742.00</b>	<b>\$1,000.00</b>	
Tax Increment Financing (TIF) Funding Assistance - Economic Development/Business Enhancement	<b>\$2,070.00</b>	<b>\$2,930.00</b>	
Tax Increment Financing (TIF) Funding Assistance – Public/Private Partnerships	<b>\$2,070.00</b>	<b>\$8,280.00</b>	
Traffic Concurrency Initial Review	<b>\$274.00</b>		
Traffic Concurrency Study	<b>\$822.00</b>		

\*The Escrow Amount is deposited with the Office of the City Auditor and Clerk at the time of application. In addition to the stated fees, the applicant is responsible for all costs associated with any legal advertising required. The applicant is also responsible for all costs associated with any development application billed by the City Attorney's Office and any fees billed by outside consultants, such as a traffic consultant, required. Advertising and legal costs are charged against the Escrow Amount. Charges for advertising and legal costs beyond the Escrow Amount will require the payment of an additional Escrow Amount. Any balance remaining in the Escrow Account will be refunded once the application is completed. Any errors in calculation must be resolved prior to receiving sign-off by the Development Review Committee. *Note:* There is no charge for an application for a Comprehensive Plan Amendment or a Rezoning if part of an annexation.

PERMIT / DEVELOPMENT REVIEW TYPE	Fees	Escrow*	✓
<b>SITE PLANS AND MAJOR AMENDMENTS*</b>			
Site Plan (including all Administrative Site Plans)			
Base Cost	\$5,485.00		
Plus \$43.00 times the number _____ of dwelling units			
Plus \$ 0.11 times the number _____ of sq. ft. for non-residential			
Plus \$ 0.05 times the number _____ of sq. ft. for parking garages			
TOTAL		\$500.00	
Site Plan Additional Reviews by Development Review Committee (DRC)			
3rd Review	\$1,097.00		
4th Review	\$1,645.00		
5th Review	\$2,194.00		
6th and Subsequent Reviews	\$2,742.00		
Site Plan - Extension of Time	\$548.00		
<b>SUBDIVISIONS*</b>			
Subdivision Preliminary Plat			
Base Cost	\$2,194.00	Variable	
Plus \$109 times the number _____ of dwelling units			
TOTAL			
Subdivision Final Plat			
Base Cost	\$3,291.00	Variable	
Plus \$109 times the number _____ of dwelling units			
TOTAL		\$1,000.00	
<b>ZONING/LAND USE APPLICATIONS AND AMENDMENTS</b>			
Major and Minor Conditional Use including Amendments (Site Plan required)			
	\$0.00	\$500.00	
Development of Regional Impact			
	\$3,291.00	\$1,000.00	
Rezoning Without Site Plan*			
Base Cost	\$6,582.00	Variable	
Plus \$109 times the number _____ of quarter acres or fraction			
TOTAL		\$1,000.00	
Rezoning With Site Plan*			
Base Cost	\$4,388.00	Variable	
Plus \$109 times the number _____ of quarter acres or fraction			
TOTAL		\$500.00	
Rezoning Ordinance Amendment			
	\$3,291.00	\$500.00	
Variance - Residential			
	\$1,645.00	\$500.00	
Variance - Non-Residential			
	\$2,194.00	\$500.00	
Variance - Extension of Time			
	\$274.00		
Variance – Limited Administrative Review for Historic Structures			
	\$274.00		
Appeal to the Board of Adjustment, Planning Board, or City Commission			
	\$1,097.00	\$500.00	
<b>FINAL TOTAL</b>			

\*Questions in calculating the amounts can be directed to Gretchen Schneider, G.M., Planning & Development: 941.954.4156

PREPARED BY:	DATE:
SIGNED:	VERIFIED BY:



**CITY OF SARASOTA**  
**DEVELOPMENT APPLICATION**

**General Information**

[Please Print or Type]

APPLICATION [PROJECT] NAME: \_\_\_\_\_

PROPERTY ADDRESS[ES]: \_\_\_\_\_

PARCEL ID NUMBER[S]: \_\_\_\_\_

	EXISTING		PROPOSED
Zone District			
Total Acres / Sq. Ft.			
Estimated Construction Value [Excluding land costs]			
<b>THE FOLLOWING MUST BE COMPLETED FOR TRAFFIC CONCURRENCY ANALYSIS AS APPLICABLE:</b>			
Use			
No. of Employees			
No. of Seats			
Hours of Operation			
Build-Out Date			
<b>THE FOLLOWING MUST BE COMPLETED FOR AMENDMENTS TO THE COMPREHENSIVE PLAN:</b>			
Future Land Use Classification			
Attach a legal description of the property and a map outlining/showing the parcel.			
<b>THE FOLLOWING MUST BE COMPLETED BY THE OFFICE OF THE CITY AUDITOR AND CLERK FOR ANNEXATIONS:</b>			
The property is within the Urban Service Boundary:	Signed:		Print:

**ATTACH A PROJECT DESCRIPTION** including total bldg. sq. ft. and, where applicable, total retail and office sq. ft., number of residential units, and proposed parking.

**APPLICATION TYPE [CHECK ALL APPLICABLE]:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Adjustment to Downtown Code  | <input type="checkbox"/> Historic Designation                    | <input type="checkbox"/> Site Plan Extension                          |
| <input type="checkbox"/> Staff <input type="checkbox"/> Planning Board                        | <input type="checkbox"/> Major Conditional Use/Amendment *       | <input type="checkbox"/> Street / R-O-W Vacation *                    |
| <input type="checkbox"/> Administrative Site Plan   | <input type="checkbox"/> Minor Conditional Use/Amendment*        | <input type="checkbox"/> Street Name Change                           |
| <input type="checkbox"/> Amendment to the EDCM/City Code                                      | <input type="checkbox"/> Miscellaneous                           | <input type="checkbox"/> Shared Parking Agreement                     |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Off-Site Parking Agreement              | <input type="checkbox"/> TIF Funding Request                          |
| <input type="checkbox"/> Appeal:  | <input type="checkbox"/> Pre-Application Conference with         | <input type="checkbox"/> Downtown <input type="checkbox"/> Newtown    |
| <input type="checkbox"/> <input type="checkbox"/> BOA <input type="checkbox"/> Planning Board | <input type="checkbox"/> Development Review Committee            | <input type="checkbox"/> Traffic Concurrence - Initial Review         |
| <input type="checkbox"/> Boundary Adjustment  | <input type="checkbox"/> Preliminary Plat                        | <input type="checkbox"/> Traffic Concurrence Study                    |
| <input type="checkbox"/> Brownfield Designation   | <input type="checkbox"/> Proportionate Fair Share Agreement      | <input type="checkbox"/> Urban Central Business District (Expedited)  |
| <input type="checkbox"/> Certificate of Appropriateness                                       | <input type="checkbox"/> Provisional Use/Market or Sidewalk Cafe | <input type="checkbox"/> Variance                                     |
| <input type="checkbox"/> Community Workshop   | <input type="checkbox"/> Provisional Use Permit Extension        | <input type="checkbox"/> Variance Extension                           |
| <input type="checkbox"/> Comprehensive Plan Amendment *                                       | <input type="checkbox"/> Regional Activity Center (Expedited)    | <input type="checkbox"/> Variance - Limited for Historic Structures   |
| <input type="checkbox"/> Development Agreement  | <input type="checkbox"/> Rezone without Site Plan*               | <input type="checkbox"/> Zoning Code Interpretation Letter:           |
| <input type="checkbox"/> Development of Regional Impact [DRI]                                 | <input type="checkbox"/> Rezone with Site Plan*                  | <input type="checkbox"/> Downtown <input type="checkbox"/> Outside DT |
| <input type="checkbox"/> Final Plat/Subdivision   | <input type="checkbox"/> Rezone Ordinance Amendment *            | <input type="checkbox"/> Zoning Code Confirmation Letter:             |
| <input type="checkbox"/> "G" Zone Waiver *  | <input type="checkbox"/> R-O-W Encroachment Agreement- Major     | <input type="checkbox"/> Downtown <input type="checkbox"/> Outside DT |
|   | <input type="checkbox"/> Site Plan / Site Plan Amendment         | <input type="checkbox"/> Zoning Text Amendment [City Only]            |

- Check if this application is a REVISION (Amendment) to a previously approved application
- Check if applying for the Affordable Housing Fee Deferral Program and you are fee simple owner of the property
- \* Community Workshop Required

<b>FOR USE BY THE OFFICE OF THE CITY AUDITOR AND CLERK</b>	
RECEIVED BY: _____	APPLICATION NUMBER: _____
DATE: _____	AMOUNT PAID: _____



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

**GENERAL INFORMATION**

[Please Print or Type]

**I. PROPERTY OWNER, LESSEE, CONTRACT PURCHASER, OR APPLICANT [Circle One]:**

Name/Title:	Telephone No:
Company Name:	Facsimile No:
Company Address:	E-Mail Address (Optional):
City/State/Zip Code:	

**II. AGENT OF RECORD [IF ANY]:** The following individual is designated as the Agent of Record for the property owner, lessee, or contract purchaser and should receive all correspondence related to the application review and billing. [Billing information will also be sent to the above-named individual.]

Name/Title:	Telephone No:
Company Name:	Facsimile No:
Company Address:	E-Mail Address (Optional):
City/State/Zip Code:	

**III. THE UNDERSIGNED, AS THE PROPERTY OWNER, LESSEE, CONTRACT PURCHASER, OR APPLICANT [Circle One], acknowledges responsibility for all City expenses associated with the referenced application(s) including time spent by City Staff and Attorneys through the date of issuance of a Final Certificate of Occupancy. [If same as #I above, note "Same". Not required for Pre-Application Conference with DRC.]**

Name/Title:	Telephone No:
Company Name:	Facsimile No:
Company Address:	E-Mail Address (Optional):
City/State/Zip Code:	

I hereby certify that all information contained herein is true and correct.

**IV. Signed this \_\_\_\_\_ day of \_\_\_\_\_,** \_\_\_\_\_

\_\_\_\_\_  
Signature of Property Owner, Lessee, Contract Purchaser, or Applicant [Circle One]

WITNESSES TO EXECUTION ON BEHALF OF APPLICANT

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

If applicable, community workshop meeting desired date and time requested:

Location:

Submit To: The Office Of The City Auditor And Clerk  
1565 First Street – Sarasota, Florida 34230  
Office Number: 941-954-4160 – Fax Number: 941-954-4113  
www.sarasotagov.com



**CITY OF SARASOTA**  
**DEVELOPMENT APPLICATION**

**Minimum Submission Checklist**

The following is to be completed for General Applications

The General Information Form (Form A), Minimum Submission Checklist (Form B-1) and Fee Form (Form 3) are required for all General Applications. All items are to be folded to approximately 8 1/2" x 11" size, collated and assembled into complete sets.

SUBMISSION REQUIREMENTS FOR GENERAL APPLICATIONS:		IF REQUIRED	YES	N/A
1.	<p><b>A. Pre-Application Conference with the Development Review Committee</b> – 1 original and 12 copies</p> <ul style="list-style-type: none"> <li>If additional information is provided, and 1 original and 12 copies folded to 8 1/2 x 11" size should be submitted. Supplementary materials may include a sketch or concept plan, site plan(s), architectural renderings, special studies, detailed narrative, &amp; other items the applicant deems pertinent.</li> </ul> <p><b>B. Pre-Application Conference with Staff regarding TIF Funding</b> – 1 original and 4 copies</p> <ul style="list-style-type: none"> <li>Supplementary materials should be folded to 8 1/2 x 11 size and should include a statement of the public purpose, should demonstrate the need for public investment; indicate sources and uses of funds; indicate the developer's financial capacity and experience; a narrative demonstrating consistency with city redevelopment objectives; and state the need for additional consultant services, if any.</li> </ul>			
2.	<p><b>Traffic Concurrency Initial Review</b> – 1 original and 1 copy</p> <ul style="list-style-type: none"> <li>Proposed site plan to include one 8 1/2" X 11" and one 24" X 36"</li> </ul>	Submit prior to filing Application		
3.	<p><b>Traffic Concurrency Study</b> – 1 original and 1 copy</p> <ul style="list-style-type: none"> <li>Copies of any plans already submitted or copies of plans being submitted</li> <li>The Scope of Services for the Traffic Concurrency Study</li> </ul> <p><b>Determination of concurrency must be made prior to filing a development application.</b></p>	Submit prior to filing Application		
4.	<p><b>Community Workshops</b> – 1 original and 1 copy</p> <ul style="list-style-type: none"> <li>Proposed site plan</li> <li>Narrative including the following information: Proposed use, height, density, intensity, parking, vehicular access, landscaping and/or any other applicable information related to the project</li> <li>Other materials may include a sketch or concept plan, architectural renderings, special studies, etc.</li> </ul> <p><b>The Community Workshop, when required, must be held prior to filing a development</b></p>	Submit 5 business days prior to 14-day notification period of Workshop Date		
5.	<p><b>Adjustments to the Downtown Code</b> <input type="checkbox"/> City Staff <input type="checkbox"/> Planning Board – 1 original and 2 copies</p> <ul style="list-style-type: none"> <li>Surveys – all signed and sealed; survey requirement can be waived by the Director</li> <li>Narrative and any other supporting documentation indicating how criteria in Section IV-1903 – Adjustments, Zoning Code (2002 Ed.), as amended, have been met.</li> </ul>			
6.	<p><b>Amendments to the City's Comprehensive Plan, a/k/a Sarasota City Plan</b> – 1 original and 1 copy</p> <ul style="list-style-type: none"> <li>Narrative responding to all the questions indicated in Form I</li> <li>If a text amendment, proposed text. If an illustration amendment, proposed changes</li> <li>Summary of comments received at the Community Workshop</li> </ul>			
7.	<p><b>Annexations</b> – 1 original and 3 copies</p> <ul style="list-style-type: none"> <li>Verification the property is within the City's Urban Service Boundary</li> <li>Legal description of property by Metes and Bounds</li> <li>Signed &amp; Sealed Boundary Surveys, Property Surveys, and Topographic Surveys by Metes and Bounds</li> <li>County Zoning &amp; Future Land Use Map applicable to the area</li> <li>Narrative responding to the following: 1) Reason for the Annexation; 2) Is the request is voluntary; 3) Is the property contiguous to the City Limits line; 4) County Future Land Use Designation, Equivalent City Zone District, and Proposed City Land Use Designation; 5) If the proposed Zone District requires a City or privately initiated Comprehensive Plan Amendment, and 6) Whether the Applicant wishes to be considered for a small-scale development activity amendment.</li> </ul>			
8.	<p><b>Boundary Adjustments/Land Divisions</b> – 1 original and 1 copy both with a signed and sealed survey</p> <ul style="list-style-type: none"> <li>Narrative</li> <li>Written authorization of all affected property owners</li> </ul>			
9.	<p><b>Provisional Use/Sidewalk Café (First time and Extensions)</b> – 1 original and 1 copy</p> <ul style="list-style-type: none"> <li>Form M (2 signed originals)</li> <li>2 Restaurant menus</li> <li>8 1/2" X 11" professional drawing showing outdoor seating including scale and directional</li> <li>Copy of the Florida Department of Business and Profession Regulation License (Food Permit) and Liquor License (if applicable)</li> <li>Copy of the City of Sarasota Local Business Tax receipt and Sarasota County Business Tax receipt</li> <li>Certificates of Insurance (see Form M)</li> </ul>			
10.	<p><b>Provisional Use/Open Air Market</b> – 1 original and 2 copies</p> <ul style="list-style-type: none"> <li>Narrative describing the type of market, days and hours of operation, types of signs and any entertainment</li> <li>Approval letter from property owner(s) identifying site address, owner's name, mailing address, telephone number and acknowledgment of proposed activity and dates of operation.</li> <li>8.5 x 11 sketch of the site identifying the location of all uses and parking if provided.</li> </ul>			
11.	<p><b>Regional Activity Center or Urban Central Business District</b> – 1 original and 3 copies</p> <ul style="list-style-type: none"> <li>Narrative responding to the questions/criteria indicated on Form O.</li> <li>Map delineating the boundary of the proposed area.</li> <li>Proposed Ordinance delineating a Regional Activity Center or Urban Central Business District, optional.</li> <li>Summary of comments received at the Community Workshop.</li> </ul>			

SUBMISSION REQUIREMENTS FOR GENERAL APPLICATIONS:		IF REQUIRED	YES	N/A
12.	<b>Revisions/Amendments to Previously Approved Applications</b> – 1 original and 2 copies • Submission requirements will be determined by agreement of Staff and the Applicant			
13.	<b>Site Plan - Extension of Time</b> – 1 original and 2 copies • Narrative	Submit 30 days prior to expiration		
14.	<b>Tax Increment Financing (TIF) Funding Assistance Requests</b> – 1 original and 4 copies • Narrative including 1) Development Budget for (a) Permanent Financing and (b) During Construction; 2) Construction timeline by Phase/Structure; 3) Detailed Operating Cash Flow Pro Forma. • 11" X 17" Schematic architectural drawings – a site plan and elevations of all facades			
15.	<b>Zoning Code Confirmation</b> – 1 original and 1 copy • Narrative			
16.	<b>Zoning Code Interpretation</b> – 1 original and 1 copy; a meeting with Staff prior to filing is encouraged • Narrative			

FAILURE TO SUBMIT ALL REQUIRED ITEMS WILL RESULT IN AN INCOMPLETE SUBMISSION

I HEREBY CERTIFY THAT THE STATED INFORMATION IS INCLUDED IN THE SUBMITTED PLANS AND/OR DOCUMENTS.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Property Owner, Lessee, Contract Purchaser, or Applicant [Circle One]

**NOTES:**

- If a Variance is filed, it must be filed simultaneously with any other land use applications for the same site and filed simultaneously with a re-submittal.
- If an Adjustment to the Downtown Code is filed, it must be filed simultaneously with any other land use applications for the same site and filed simultaneously with a re-submittal.
- Re-Submitted Applications require a narrative certified by signature of owner, developer, representative, engineer, or architect responding to each issue raised by Development Review Committee members; a corresponding pointer on plan documents noting where each narrative issue has been resolved; and changes on plan documents indicated with "clouds".
- Completion of the Traffic Study averages 30 to 40 business days.



**CITY OF SARASOTA**  
**DEVELOPMENT APPLICATION**

## Minimum Submission Checklist

If you are applying for approval of any of the following application types for a project with a residential component, you must first contact the School Board of Sarasota County for a School Impact Analysis Determination: final subdivision approval, site plans, comprehensive plan amendments, rezonings, or preliminary subdivision approval (see reverse for contact information).

### The following is to be completed for Development Applications

The following plans, reports and information are **required** for City review of Development Applications. The General Information Form (Form A) Minimum Submission Checklist (Form B-2) and Fee Form (Form 1) are to be submitted for all Development Applications.

All items are to be **folded to approximately 8 ½" x 11" size** and collated and assembled into complete sets. No Development Application will be accepted for review until deemed complete by the Office of the City Auditor and Clerk. This form shall be used for all applications except Temporary Commercial Activity Permits and Adult Use Permits. The items required for Major Encroachment Agreements are indicated with an asterisk. The appropriate Application Fee as indicated on the Fee Schedule must be collected at the time the application is submitted.

For a description of all items, please refer to the **Definitions** section included in the General Information Packet. After acceptance of an application by the DRC, the Case Planner will advise regarding the scheduled hearing by the Planning Board/Local Planning Agency and/or the City Commission. The notification will include the appropriate number of plan sets required as well as the requirement for one electronic version of the plan in Adobe (.pdf format).

SUBMISSION REQUIREMENTS FOR DEVELOPMENT APPLICATIONS		REQUIRED	YES	N/A
1.	<b>De minimis letter/Draft Traffic Study /or Signed Contract for Traffic Study</b> - 4 copies <i>Not Required for:</i> Street/R-O-W Vacation Applications, Off-Site and Shared Parking Agreements	Submit at time of application		
2.	<b>Community Workshop Minutes (Proof of workshop)</b> - 12 copies <i>Required for:</i> Conditional Use, Rezoning, Rezone Ordinance Amendment, Street/R-O-W Vacation, Development Agreement, and "G" Zone Waiver Applications	Submit at time of application		
3.	<b>Ownership Disclosure (Form C)</b> – 1 original and 11 copies <i>Required for:</i> Rezoning & Rezone Ordinance Amendment Applications			
4.	<b>Affidavit – Conditional Use (Form D1)</b> – 1 notarized original and 11 copies <i>Required for:</i> Major and Minor Conditional Use Applications			
5.	<b>Applicant Disclosure / Proffer Statement (Form E)</b> – If offered, 1 signed and notarized original and 11 copies <i>Required for:</i> Rezoning, Site Plan, Major and Minor Conditional Use Applications	If offered		
6.	<b>Affordable Housing Impact (Form F)</b> – 1 original and 11 copies <i>Required for:</i> Rezoning, Rezone Ordinance Amendment, Street/R-O-W Vacation Applications			
7.	<b>Special Power of Attorney Affidavit (Form G)</b> - 1 notarized original and 11 copies	If applicable		
8.	<b>Street Name Change (Forms K)</b> – 1 original and 11 copies	If applicable		
9.	<b>Narrative</b> – 1 original and 11 copies per Zoning Code (2002 Ed.) (1 original and 2 copies for Major Encroachments*) Please see the definitions section of the General Information Package as to information to include in the narrative. <i>Note:</i> Narrative for Major Encroachment Agreements must include a legal description of the encroachment.	Yes		
10.	<b>Letters from Corresponding Utility Companies</b> - 12 copies A meeting with Staff prior to submittal is encouraged. <i>Required for:</i> Street/R-O-W/Utility Easement Vacations See General Information Package for Utility Company contact information.			
11.	<b>If applicable, previously issued Zoning Code Confirmation/Zoning Code Interpretation</b> – 12 copies	If applicable		
12.	<b>Additional</b> reports, studies, letters, documentary evidence, and the names and addresses of expert witnesses, if any, who may be called or submitted in any future public hearing - 12 copies	If applicable		
13.	<b>*Building Elevation Plans</b> – 1 signed and sealed original and 11 copies <i>Required for:</i> Site Plans			
14.	<b>Major Encroachment</b> – 1 original & 11 copies (original includes all forms, below items and signed & sealed plans) Sign-off letters from City & County utilities, FPL, gas, cable & phone Narrative containing written justification & addressing Section VII-1201 of the Zoning Code <i>Required for:</i> Major Encroachment Agreements only (A meeting with Staff prior to submittal is encouraged)			
15.	<b>*Landscape Plans</b> – 1 signed and sealed original and 11 copies <i>Required for</i> Site Plans All trees to be removed or relocated must be reflected on the plans with the required mitigation in accordance with Section VI-Division 3.1, Zoning Code, Irrigation Plans must be included at time of building permit application.			
16.	<b>*Site Civil Engineering Plans</b> - 12 copies - All signed and sealed. <b>3 additional copies of the Civil Site Plans</b> <i>Required for:</i> Site Plans			
17.	<b>Site Plans</b> - 12 copies - All signed and sealed except: • Site Plans accompanying a Conditional Use Application do NOT have to be signed and sealed if for an existing building with NO site improvements <i>Required for:</i> Site Plans and Conditional Uses			
18.	<b>Topographical and Property Boundary Surveys</b> <i>Required for:</i> Site Plans – 12 copies, All signed and sealed Site Plans accompanying a Conditional Use Application – 1 signed and sealed and 11 copies Rezoning – 1 signed and sealed original and 2 copies			
19.	<b>School Impact Analysis Determination</b> - 12 copies <i>Required for:</i> Only for the following application types containing a residential component: preliminary or final subdivision approval, site plans, comprehensive plan amendments, or rezonings			

\*Not required for Site Plans accompanying a Conditional Use Application if for an existing building with NO site improvements

FAILURE TO SUBMIT ALL REQUIRED ITEMS WILL RESULT IN AN INCOMPLETE SUBMISSION

I HEREBY CERTIFY THAT THE STATED INFORMATION IS INCLUDED IN THE SUBMITTED PLANS AND/OR DOCUMENTS.

Please respond to the following:

1. Applicant has included on the plans the following statement -  Yes  No  
"Applicant understands the exterior site lighting provision of Section VII-1402, Zoning Code, and will provide documentation the provision will be met at the time of building permit application."
2. Site Civil Engineering Plan to include stormwater area – A meeting with Staff prior to submittal is encouraged.  Yes  No  
Applicant has included on the plans the following statement -  
"Applicant will assure the plans will meet all engineering requirements and the standards of the Southwest Florida Water Management District (SWFMWD) at the time of building permit application."
3. For Landscape Plans, which are required for Site Plans, Applicant confirms that an on-site inspection by the City Arborist to discuss tree protection has been held prior to submission of this application.  Yes  No

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Property Owner, Lessee, Contract Purchaser, or Applicant [Circle One]

**NOTES:**

- If a Variance is filed, it must be filed simultaneously with any other land use applications for the same site and filed simultaneously with a re-submittal.
- If an Adjustment to the Downtown Code is filed, it must be filed simultaneously with any other land use applications for the same site and filed simultaneously with a re-submittal.
- Re-Submitted Applications require a narrative certified by signature of owner, developer, representative, engineer, or architect responding to each issue raised by Development Review Committee members; a corresponding pointer on plan documents noting where each narrative issue has been resolved; and changes on plan documents indicated with "clouds".
- Completion of the Traffic Study averages 30 to 40 business days.
- The required Plans noted in Checklist Items 13 through 19 above shall be stapled together and combined with any submittals noted in Checklist Items 1 through 12 to create complete development application sets, accompanied by copies of the General Information Form and the Minimum Submission Checklist.
- Applicants for the Affordable Housing Fee Deferral Program who are fee simple owners of the property must submit an extra copy of Form 3 and Form A, B, and F.

**Contact Information for School Impact Analysis Determination**

Micki Ryan  
Planning Analyst  
Long Range Planning Department  
School Board of Sarasota County  
1960 Landings Boulevard  
Sarasota, FL 34231  
**941-927-9000, ext. 32263**



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

### Ownership Disclosure Form

THIS FORM MUST BE COMPLETED FOR ALL COMPREHENSIVE PLAN AMENDMENT, REZONING, AND REZONE ORDINANCE AMENDMENT APPLICATIONS.

Please provide the information as requested below in accordance with Ordinance No. 92-3556:

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

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Ownership Percentage: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Ownership Percentage: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Ownership Percentage: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Ownership Percentage: \_\_\_\_\_

(Use additional sheets for more space.)

2. For each corporate owner, list the name, address, and title of each officer of the corporation, the name and address of each director of the corporation, and the name and address of each shareholder who owns 5% or more of the stock of the corporation. Shareholders need not be disclosed as to corporations whose shares of stock are traded publicly on any national or regional stock exchange.

Name of Corporation: \_\_\_\_\_  
Officers: \_\_\_\_\_  
Address: \_\_\_\_\_  
Directors: \_\_\_\_\_  
Address: \_\_\_\_\_  
Shareholders: \_\_\_\_\_  
Address: \_\_\_\_\_

Name of Corporation: \_\_\_\_\_  
Officers: \_\_\_\_\_  
Address: \_\_\_\_\_  
Directors: \_\_\_\_\_  
Address: \_\_\_\_\_  
Shareholders: \_\_\_\_\_  
Address: \_\_\_\_\_

(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 including the percentage of interest of each beneficiary.

Name of Trust: \_\_\_\_\_  
Trustees: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Beneficiaries: \_\_\_\_\_  
Address: \_\_\_\_\_  
Percentage of Interest: \_\_\_\_\_  
\_\_\_\_\_

(Use additional sheets for more space.)



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

4. For partnerships, including limited partnerships, list the name and address of each principal in the partnership, including general or limited partners and their percentage of ownership interest in the partnership.

Name of Partnership: _____	Name of Partnership: _____
Principal: _____	Principal: _____
Address: _____	Address: _____
Percentage of Ownership: _____	Percentage of Ownership: _____

(Use additional sheets for more space.)

5. In the circumstances of a contract for purchase, list the name of each contract vendee, with the names and addresses and percentages of interest, the same as required for corporations, trust, or partnerships. In addition, the date of the contract for purchase shall be specified along with any contingency clause relating to the outcome of the consideration of this petition.

Contract Vendee:	Contract Vendee:
Name: _____	Name: _____
Address: _____	Address: _____
Percentage of Interest: _____	Percentage of Interest: _____

(Use additional sheets for more space.)

6. As to any type of owner referred to above, a change of ownership or percentage of interest between owners occurring subsequent to this application, shall be disclosed in writing to the City Auditor and Clerk prior to the date of the public hearing on the petition by the Planning Board or final Public Hearing by the City Commission.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner, Agent, Petitioner Signature

<b>For Use by the Office of the City Auditor and Clerk</b>	
Date: _____	Application Number: _____



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Affidavit – Conditional Use

BEFORE ME, this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, the undersigned Notary Public, personally appeared \_\_\_\_\_ (Affiant), who being first duly sworn as required by law deposes and says:

1. Affiant has filed an application for conditional use with the City of Sarasota designated Conditional Use Application No. \_\_\_\_\_ (insert application number) pertaining to the real property described in Exhibit A, a copy of which is attached hereto and made a part hereof by reference. This Affidavit is being provided in accordance with the application requirements for conditional uses set forth in Section IV-910(b)(3), Zoning Code (2002 Ed.).

2. To be completed only if the applicant for the conditional use is a corporation:

The Affiant is a \_\_\_\_\_ (insert title of officer) of \_\_\_\_\_ (insert name of corporation) and is duly authorized by the above-named corporation to execute this Affidavit.

3. Affiant certifies that he/she is familiar with Section IV-910, Zoning Code (2002 Ed.) regarding the revocability of conditional uses and has had a copy of Section IV-910, Zoning Code (2002 Ed.) provided to him/her, and fully understands its content.

4. Affiant acknowledges that if Conditional Use Application No. \_\_\_\_\_ (insert application number) is finally approved by the City of Sarasota, that the conditional use approval may be revoked by the City of Sarasota at any time if the construction of the conditional use has not been completed in accordance with the conditions of the approval, or if the use is not conducted consistent with any condition of approval and that such grounds for revocation may include, but are not limited to the following:

- a. A change in intensity (character) of the conditional use beyond the intensity that was initially intended at the time of approval which affects the public health, safety and welfare since approval of the conditional use; or
- b. Any violations of the Zoning Code (2002 Ed.), including any conditions attached to the conditional use, by the owner/operator of the use.

5. Affiant acknowledges that such revocation of the conditional use may occur regardless of the amount of the investment Affiant has committed to the conditional use.

6. Affiant agrees to provide written notification to any future purchasers of the real property described herein or anyone having any legal interest in the subject conditional use of the revocation provisions of Section IV-910, Zoning Code (2002 Ed.).

7. Affiant acknowledges that future (subsequent) purchasers, owners, or operators of the conditional use described herein shall be required to submit to the Director of Neighborhood and Development Services through the Office of the City Auditor and Clerk the Affidavit required pursuant to Section IV-910, Zoning Code (2002 Ed.) and shall so notify such future purchasers, owners, or operators.

8. This Affidavit is made and given by the undersigned with full knowledge of the applicable Florida Laws regarding sworn affidavits and the penalties and liabilities resulting from false statements and representations herein.



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

IN WITNESS WHEREOF, Affiant has caused this instrument to be executed on the day and year first above written.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Affiant (Signature)

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

\_\_\_\_\_  
Witness

Print Name: \_\_\_\_\_

The foregoing Affidavit was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public  
State of Florida at Large

My Commission expires: \_\_\_\_\_

**A COMPLETE AFFIDAVIT MUST ACCOMPANY ALL APPLICATIONS FOR MAJOR OR MINOR CONDITIONAL USES.**

**Instructions:**

1. Insert Conditional Use Application number in the blank spaces provided in Sections 1 and 4. This is assigned when application is submitted to the Office of the City Auditor and Clerk.
2. Please complete Section 2 only if the applicant is a corporation.
3. Please attach the legal description for the real property for which the conditional use is requested as Exhibit A to the affidavit. (See Section 1)
4. Please have two (2) witnesses sign the affidavit and print their name below their signature.
5. Please have the affidavit notarized in the blank provided on page 2.
6. Please refer to the Definitions section of the General Information booklet and provide a narrative stating how the applicable conditional use criteria of the Zoning Code (2002 Ed.) will be met.

**All of the above must be completed to qualify as a complete affidavit.**



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Applicant's Disclosures

[Due At The Time The Application Is Filed]

A. The names and addresses of witnesses I intend to call at the hearing, during the presentation of my evidence or in rebuttal are:

1. \_\_\_\_\_

2. \_\_\_\_\_

[If insufficient space, please attach a list]

B. The names and addresses of expert witnesses I intend to use, if any, and their qualifications are:

1. \_\_\_\_\_

2. \_\_\_\_\_

[If insufficient space, please attach a list]

C. The following is a summary of the facts to be presented:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

[If insufficient space, please attach a list]

**NOTE:** Copies of all reports, studies, letters, documentary evidence and summaries of evidence you intend to use are required to be filed no later than ten (10) days prior to the date of the public hearing.

\_\_\_\_\_  
[Applicant Signature]

\_\_\_\_\_  
[Date]

\_\_\_\_\_  
[Print Name]

\_\_\_\_\_  
[Application No.]



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

**Proffer Statement**

The undersigned applicant(s) for approval of application(s) \_\_\_\_\_ hereby proffer the following special condition(s) to be imposed by the City of Sarasota, Florida, upon the property located at \_\_\_\_\_

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

[Use additional sheets if more space required.]

IN WITNESS WHEREOF, the undersigned have executed this Proffer Statement on the date certified below.

Signed, sealed and delivered in the presence of:

\_\_\_\_\_  
**FIRST WITNESS**  
[Signature]  
  
\_\_\_\_\_  
[Type or Print Name]

\_\_\_\_\_  
**APPLICANT OR DESIGNATED REPRESENTATIVE**  
[Signature]  
  
\_\_\_\_\_  
[Type or Print Name]

\_\_\_\_\_  
**SECOND WITNESS**  
[SIGNATURE]  
  
\_\_\_\_\_  
[Type or Print Name]

**STATE OF FLORIDA  
SARASOTA COUNTY**

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_ who is ( ) personally known to me; or (has produced) \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public \_\_\_\_\_ County, Florida  
My Commission Expires \_\_\_\_\_



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

**Administrative Regulation No. 039 . A005 . 1298  
Impact of Ordinances on Affordable Housing**

1. Does the proposed project have any impact on the affordability of housing?

Yes

No

If yes, complete the following:

2. Describe the impact of the proposed project on the affordability of housing. If this impact can be quantified, include this amount in the narrative below.

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The average additional cost per house for New Construction is: \$\_\_\_\_\_

The average additional cost per house for Rehabilitation is: \$\_\_\_\_\_

3. What alternatives, if any, have been considered or are available that could minimize any negative effect of the proposed project on the affordability of housing?

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Prepared by: \_\_\_\_\_

Date: \_\_\_\_\_



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Affordable Housing Fee Deferral Program

To be eligible to receive a fee deferral, please submit the following:

1. Amount of Deferral Requested (Applicant responsible for Escrow amount):
2. A tax-exempt ruling from the Internal Revenue Service under Section 501(c)(3) or (4) of the Internal Revenue Code.
3. A "Certificate of Good Standing" from the Florida Division of Corporations.
4. I certify that the incomes of the beneficiaries will meet the eligibility requirements and that the sales price or monthly rent will be less than the amounts listed below:

Sales Price:
Monthly Rent:

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Signature of Property Owner, Lessee, Contract Purchaser, or Applicant [Circle One]

Please have the following completed by:

**THE OFFICE OF HOUSING AND COMMUNITY DEVELOPMENT  
FIRST FLOOR, FEDERAL BUILDING  
111 SOUTH ORANGE AVENUE – SARASOTA, FLORIDA 34236  
Office Number: 941-951-3640 – Fax Number: 941-951-3648  
www.sarasotagov.com**

Amount of Deferral Approved:	Date:
Approved by (please print):	Approved by (signature):



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

**Special Power of Attorney Affidavit - Corporation**

This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, I, \_\_\_\_\_  
as \_\_\_\_\_ [title of officer] of \_\_\_\_\_ [name of corporation],  
a \_\_\_\_\_ [state of incorporation] corporation, on behalf of the corporation as the  
owner/contract purchaser [circle one] of \_\_\_\_\_  
\_\_\_\_\_ [describe zoning lot(s) by address and tax PIN number and  
attach legal description] make, constitute, and appoint \_\_\_\_\_  
of \_\_\_\_\_ [insert address], my true and lawful attorney-in-fact,  
and in my name, place and stead giving unto said \_\_\_\_\_  
full power and authority to do and perform all acts and make all representations necessary in connection  
with the following Development Approval Application(s) filed with the City of Sarasota: \_\_\_\_\_  
\_\_\_\_\_.

The right, powers and authority of said attorney-in-fact herein granted shall commence and be in full force  
and effect on \_\_\_\_\_, \_\_\_\_\_, and shall remain in full force and effect thereafter until  
actual notice, by certified mail, return receipt requested is received by the Office of the City Auditor and  
Clerk for the City of Sarasota stating that the terms of this power have been revoked or modified.

\_\_\_\_\_  
[Name of Corporation]

By: \_\_\_\_\_  
[Signature]

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF SARASOTA

The foregoing Special Power of Attorney Affidavit was acknowledged before me this \_\_\_\_\_ day of  
\_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_ [title of officer] of \_\_\_\_\_  
[name of corporation], on behalf of the corporation. He/she is personally known to me or has produced  
\_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public  
State of Florida at Large

My commission expires: \_\_\_\_\_



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

**Special Power of Attorney Affidavit - Not Corporation**

This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, I, \_\_\_\_\_  
of \_\_\_\_\_ [insert address], the  
owner/contract purchaser [circle one] of \_\_\_\_\_  
\_\_\_\_\_ [describe zoning lot(s) by address and tax PIN  
number and attach legal description] make, constitute, and appoint \_\_\_\_\_  
of \_\_\_\_\_ [insert address], my true and lawful attorney-  
in-fact, and in my name, place and stead giving unto said \_\_\_\_\_  
\_\_\_\_\_ full power and authority to do and perform all acts and  
make all representations necessary in connection with the following Development Approval Applications  
filed with the City of Sarasota: \_\_\_\_\_  
\_\_\_\_\_

The right, powers and authority of said attorney-in-fact herein granted shall commence and be in full force  
and effect on \_\_\_\_\_, \_\_\_\_\_, and shall remain in full force and effect thereafter until  
actual notice, be certified mail, return receipt requested is received by the Office of the City Auditor and  
Clerk for the City of Sarasota stating that the terms of this power have been revoked or modified.

\_\_\_\_\_  
Owner/Contract Purchaser [circle one]

Print Name: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF SARASOTA

The foregoing Special Power of Attorney Affidavit was acknowledged before me this \_\_\_\_\_ day of  
\_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has  
produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public  
State of Florida at Large

My commission expires: \_\_\_\_\_



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Request For Affected Person Status

To Be Filed with City Auditor and Clerk's Office  
At Least Five (5) Full Working Days Prior To Public Hearing

NOTE: The day the request is submitted and the day of the meeting do not count as a Full Working Day for submittal purposes

I, \_\_\_\_\_, request the status of "Affected Person" in the following quasi-judicial action:

Please write either "Yes" or "No" in the blank before each statement below as appropriate:

- \_\_\_\_\_ 1. I am an owner, resident or other occupant of real property located within five hundred (500) feet of the real property which is the subject of the quasi-judicial action.
- \_\_\_\_\_ 2. I am the designated representative of an individual owner, resident or other occupant of real property located within five hundred (500) feet of the real property which is the subject of quasi-judicial action.
- \_\_\_\_\_ 3. I am the designated representative of a business entity, e.g. corporation, partnership, civic or religious organization, professional association, or trust, which owns real property located within five hundred (500) feet of the real property and which is the subject of the quasi-judicial action.
- \_\_\_\_\_ 4. I am the designated representative of a condominium or neighborhood association whose members consist of owners, residents or occupants of real property within five hundred (500) feet of the real property which is the subject of the quasi-judicial action.

NOTE: If you responded "Yes" to item 2, 3, or 4 above, you must have WRITTEN AUTHORIZATION signed by the person, entity, or association you represent. In the case of a condominium or neighborhood association, the authorization must be signed by an officer or member of the Board of Directors of the association.

If you responded "Yes" to any of the four statements above, PLEASE SKIP ITEM NO. 5.

- \_\_\_\_\_ 5. I will be adversely affected by the approval of the above referenced application because: Your answer should explain how you will be adversely affected to a greater degree than other members of the community at large. You may attach a separate sheet if necessary.

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

I understand that completion of this form does not substitute for speaking in person at the public hearing on the matter. I hereby certify that the above statements are true to the best of my knowledge and belief. I understand that I or someone on my behalf must be present at the public hearing to present my case to the Historic Preservation Board, the Board of Adjustment, the Planning Board, and/or the City Commission.

Print Name:
Print Address:

Telephone No:
Application No.:
Project Name:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For use by the Office of the City Auditor and Clerk: Timely filed?  Yes  No Initials: \_\_\_\_\_



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Information Regarding “Affected Person” Status

1. Florida Law requires that public hearings on certain matters such as requests for site specific rezonings and site plan approvals must be conducted in accordance with “quasi-judicial” proceedings. In a quasi-judicial proceeding, the person or entity filing the request under consideration has the right to present evidence, to question witnesses and to speak in rebuttal.
2. At a quasi-judicial public hearing, members of the public have the same right to speak and be heard as they would in a non quasi-judicial hearing. You are not required to file a Request for Affected Person Status to be allowed to speak at the public hearing.
3. However, if as a member of the public, you or an attorney or agent acting on your behalf would like to have the same opportunity the applicant will have to present testimony from third parties such as expert witnesses and to cross examine witnesses who speak against your position, you may wish to seek “affected person” status.
4. You may also wish to seek “affected person” status at the quasi-judicial hearing if there is a possibility that you would appeal the final decision on a quasi-judicial matter to a court of law. To preserve your status as an “affected person,” you must be present at the public hearing concerning the matter in which you are seeking “affected person” status.
5. In order to qualify as an “affected person” you must complete a Request for Affected Person Status form (see reverse). These forms are available at the Office of the City Auditor and Clerk at City Hall, Room 110, 1565 First Street, Sarasota, Florida. Telephone No. (941) 954-4160. The form must be completed and submitted at least five (5) complete working days prior to the quasi-judicial public hearing. Your status as an “affected person” will be determined at the public hearing. Even if you qualify as an “affected person,” you are also requested to complete the “Request to Speak” form available at the public hearing.
6. To speak as an interested citizen at the public hearing, you need only complete a Request to Speak form when you attend the hearing.
7. Written authorization from the owner, resident, occupant, or an officer or member of the board of directors of neighborhood association is required to qualify as a “designated representative.” Section IV-202 (F)(3)(a), Zoning Code (2002 Ed.)

Office of the City Auditor and Clerk  
City Hall, Room 110  
1565 First Street • Sarasota, Florida 34236  
Telephone No. (941) 954-4160

Post Office Box 1058 • Sarasota, Florida 34230



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Amendments to the Sarasota City Plan Information and Data Requirements

Please indicate:

Current Land Use Classification:
Proposed Land Use Classification:

Please answer all applicable questions and provide source(s) for all data.

1. What is the reason for the proposed amendment?
2. A proposed amendment involving text changes should include a copy of the currently adopted text with proposed additions underlined (e.g. City of Sarasota) and proposed deletions struck through (e.g. ~~City of Sarasota~~)
3. A proposed amendment involving map changes should state the currently adopted classification and the proposed change(s).
4. Analysis of the character of the parcel, using additional pages as necessary, from the *Sarasota City Plan* in order to determine its suitability for the proposed use(s) including:  
FEMA flood zone designation(s) from Illustration EP-4 or its source document;  
Natural Resources from Illustration EP-2, EP-3, and EP-5 or their source documents;  
Historic Resources from the Historic Preservation Chapter;  
Hurricane Storm Surge Category from Illustration EP-11 or its source document.
5. Hurricane evacuation information based on the proposed amendment, considering the number of persons requiring evacuation, availability of hurricane shelter spaces, and evacuation routes and times from the Sarasota County Emergency Management Center.
6. Whether the proposed amendment affects beach accessibility.
7. Whether the site contains habitat for species listed by Federal, State or Local Agencies as endangered, threatened or species of specific concern as identified by Illustration EP-6 of the *Sarasota City Plan*.  
If yes, identify the species and show the habitat location on map.
8. Whether the proposed amendment affects adjacent local governments. If yes, how?
9. How will the public interest be furthered if the amendment were to be approved?
10. Why is the current land use classification for the subject parcel no longer appropriate?
11. Are there any changes in the character of the area surrounding the subject parcel since the adoption of the *Sarasota City Plan* which would support the amendment?
12. What benefit would accrue to adjacent and nearby properties as a result of the proposed amendment? What detriments?



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

13. Do any alternatives exist to accommodate the applicant's needs which would not require changes to the comprehensive plan and why the applicant is not proceeding with these alternatives. If so, what?
14. If you will be seeking a concurrent review of a rezoning request or other type of development approval (e.g., rezoning, conditional use permit, site plan, etc.) please so indicate and provide the characteristics of the request.
15. If other City actions are associated with your proposal (e.g., lease modifications, annexation, etc.) please so indicate and provide the characteristics of the request.

**Public Infrastructure/Service Analyses  
Map Amendments Only**

The Florida Statutes require that the City analyze all proposed land use changes in order to determine if the City's adopted levels-of-service (LOS) will be maintained and that existing infrastructure capacities are adequate to support the impact of the development associated with the land use change. In order for staff to undertake this LOS analysis, the applicant can pursue one of two options described below.

Option 1: - Worst-Case Scenario. Under this option, the applicant notes at the pre-application conference that he/she has no specific development plans for which the level-of-service analysis can be based. In this case, City staff will create a "Level of Service Analysis Table" based upon the most intensive activity that could be constructed on the subject parcel as determined by the most intensive implementing zone district. This table will be prepared within two weeks after the pre-application conference and transmitted to the applicant, the City departments of Public Works and Engineering as well as the Sarasota County Area Transit Service staff. Staff from these agencies will then determine if adopted LOS values will be maintained or whether additional information is required before this determination can be made (e.g., a traffic study).<sup>1</sup>

Option 2: - Proffered Rezone Petition. Under this option, the applicant provides at the pre-application conference specific proffers reflecting specific land uses, intensities/densities, heights, and other components of a "concept plan." Staff will then prepare the "Level of Service Analysis Table" based upon these proffers and transmit it to the applicant, the Department of Public Works and the Engineering Department. Staff from these two departments will then determine if adopted LOS values will be maintained or whether additional information is required before this determination can be made (e.g., a traffic study).<sup>2</sup> If there are companion development application(s) accompanying the proposed amendment or if a specific development plan for the future has been determined, describe the proposal(s) including building(s) square footage, use, etc.

Note: If Option 2 is chosen, a "proffered rezone" application must be filed concurrently with the Comprehensive Plan Amendment Application.

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<sup>1</sup> The procedure for determining the impact of the proposed land use change under this option involves a comparison of the "most intense" development possible under the existing Future Land Use classification with the "most intense" development possible under the proposed Future Land Use classification. This comparison will determine the *net* impact that the proposed amendment will have on LOS related services (e.g., transportation, recreation, water, sewer, storm water, public transit, etc). These "most intense" scenarios are based upon the land use classifications implementing zone districts.

<sup>2</sup> The procedure for determining the impact of the proposed land use change under this option involves a comparison of the "most intense" development possible under the existing Future Land Use classification with the development reflected by the proposed "proffered" rezone. This comparison will determine the *net* impact that the proposed amendment will have on LOS related services (e.g., transportation, recreation, water, sewer, storm water, public transit, etc).



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Public Input Sheet

DATE: \_\_\_\_\_ APPLICATION NO. \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

**Please indicate subject area of comment below:**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Neighborhood            | <input type="checkbox"/> Housing                   | <input type="checkbox"/> Environmental Protection and Coastal Islands |
| <input type="checkbox"/> Recreation / Open Space | <input type="checkbox"/> Utilities                 | <input type="checkbox"/> Transportation                               |
| <input type="checkbox"/> Future Land Use         | <input type="checkbox"/> Governmental Coordination | <input type="checkbox"/> Public School Facilities                     |
| <input type="checkbox"/> Capital Improvements    | <input type="checkbox"/> Historic Designation      |   |

**Whether you plan to speak or not, please indicate your concerns and/or comments below.**

Comment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Request to Change an Existing Street Name

We, the undersigned (see attached petition list), hereby request the City of Sarasota for the following Street Name Change:

**EXISTING STREET NAME:** \_\_\_\_\_

**ADDRESS BLOCK RANGE:** \_\_\_\_\_ **THROUGH** \_\_\_\_\_  
(Example: 001 through 1199)

**LIMITS OF STREET: FROM:** \_\_\_\_\_

**TO:** \_\_\_\_\_

**PROPOSED STREET NAME:** \_\_\_\_\_

**REASON FOR STREET NAME CHANGE:** \_\_\_\_\_

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

**APPLICATION SUBMITTED BY:**

Neighborhood Association:
Print Contact Name:
Print Contact Address:
City/State/Zip Code:

Home Telephone No:
Work Telephone No:
Facsimile No:
E-Mail Address (Optional):

\_\_\_\_\_  
**APPLICANT SIGNATURE**

\_\_\_\_\_  
**DATE**



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Request for Street Name Change Petition

We, the undersigned, hereby request the following City of Sarasota Street Name Change:

**Existing Street Name:** \_\_\_\_\_

**PROPOSED STREET NAME:** \_\_\_\_\_

	[PLEASE PRINT CLEARLY]	[PLEASE CHECK ONE THAT APPLIES]			
A). NAME (Print) & B). SIGNATURE	ADDRESS	PROPERTY OWNER	BUSINESS OWNER	TENANT	
A).					
B).					
A).					
B).					
A).					
B).					
A).					
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A).					
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A).					
B).					
A).					
B).					

Use additional sheets if necessary



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

**Request to Establish a Pet-Free Area  
within a City Park**

Pursuant to Section 22-3, Sarasota City Code

We, the undersigned (see attached petition list), hereby request the City of Sarasota establish a pet-free area in the following City park:

**PARK NAME:** \_\_\_\_\_

**LIMITS OF PET-FREE AREA: FROM:** \_\_\_\_\_

**To:** \_\_\_\_\_

**REASON FOR PET-FREE AREA:** \_\_\_\_\_

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

Attach a narrative addressing the following:

1. The effect of the pet-free areas on users of the park.
2. Whether the creation of the pet-free areas would enhance or diminish use of the park.
3. Whether these areas can be distinguished from other parts of the park by the posting of signs or whether landscaping, fencing, berms or other barriers are required to clearly distinguish the area.
4. A letter from the affected Neighborhood Association supporting the designation.

**APPLICATION SUBMITTED BY:**

Name:
Print Contact Name:
Print Contact Address:
City/State/Zip Code:

Home Telephone No:
Work Telephone No:
Facsimile No:
E-Mail Address (Optional):

\_\_\_\_\_  
**APPLICANT SIGNATURE**

\_\_\_\_\_  
**DATE**



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Request to Establish a Pet-Free Area within a City Park

We, the undersigned, hereby request the City of Sarasota establish a pet-free area in the following City park:

**Park Name:** \_\_\_\_\_

	[PLEASE PRINT CLEARLY]	[PLEASE CHECK ONE THAT APPLIES]			
A). NAME (Print) & B). SIGNATURE	ADDRESS	PROPERTY OWNER	BUSINESS OWNER	TENANT	
A).					
B).					
A).					
B).					
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A).					
B).					

Use additional sheets if necessary



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

**Revocable Provisional Use/Sidewalk Café Permit**

I understand that this is an application only and submission thereof does not authorize me to begin operation of the sidewalk café. I may begin operation only after the permit has been issued by the City of Sarasota. I acknowledge that the application fees are not refundable and I have received a copy of the sidewalk café regulations, Chapter 30-22 of the City Code and the application information. As an express condition of the issuance of the Permit and in consideration of being granted the Permit, I agree to indemnify and hold harmless the City against all claims, liability, loss, injury, death or damage whatsoever on account of or arising out of the subject matter of this Permit. Further, in the event the sidewalk café has chairs, tables, umbrellas, plants, outdoor lighting, or irrigation that is affixed to the sidewalk or ground, and the City needs to access infrastructure located beneath the permit area, I hereby agree to indemnify and hold harmless the City against all claims, liability, loss, injury, death or damage whatsoever on account of or arising out of the removal of the fixed improvements.

In consideration of the issuance of this Sidewalk Café Revocable Provisional Use Permit, I agree to adhere to all standards or requirements noted below and those of Chapter 30-22.

Please include the following in the Development Application:

A scale drawing showing the layout and dimensions of the existing curb line or the lateral line of a street, identifying a minimum of 5 foot wide walking space on sidewalk area, adjacent private property line, 30 foot triangle of site visibility (at street intersections), the requested Permit Area and ground floor entry of the support business; location of tables, chairs, doorways, handicapped ramps, pedestrian crosswalks, bus stops, taxi stands, alleyways, street lights, utility poles, trash receptacles, benches, trees; size of tables, chairs, umbrellas, and any other sidewalk obstruction either existing or proposed within the vicinity. If in a Commercial, Tourist (CT) Zone, show location of plants, electrical outlets, outdoor lighting and/or irrigation. Please note in the other zones electrical outlets are not permitted in the café areas. The permittee will need to ensure the furnishings stay out of the identified walkway.

A copy of the current City of Sarasota and Sarasota County Local Business Tax receipt for the business.

Copy of the business' State of Florida Department of Business and Professional Regulation license (Food License) and Alcohol License (if applicable).

Proof of insurance issued by an insurance company licensed to do business in the State of Florida providing public liability and property damage insurance pertaining to the Permit Area in a minimum amount of \$1,000,000 per person and \$2,000,000 in the aggregate per occurrence and property damage in a minimum amount of \$500,000 and liquor liability (if applicable) in a minimum amount of \$1,000,000, which shall name the City of Sarasota as an additional insured; and the same shall provide that the policy shall not terminate or be canceled prior to the expiration date without 30 days advance written notice to the City.

Café is in front of business applying for permit or an approved café location designed for such and is it within 50 feet of the entrance? Yes or No

If not, include copy of letter requesting support from owner of the entrance in front of the location where proposed.

Verification that the dimension of the tables does not exceed 48 inches in diameter, 48 inches in length and 30 inches in height. Verification that the dimension of the umbrellas does not exceed 8 feet in diameter and will be fabric covered.

Copy of the Restaurant Menu.

Please complete the following:

1. Beer, wine, or other alcoholic beverage (will) - (will not) be served or consumed at the sidewalk café.

**APPROVAL CONDITIONS:**

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**CITY OF SARASOTA**  
**DEVELOPMENT APPLICATION**

Application is hereby made for the Sidewalk Café Revocable Provisional Right-of-way use Permit described here on. The undersigned has reviewed this application and I hereby certify that all information contained herein is true and correct. In the event the sidewalk café has chairs, tables, umbrellas, plants, outdoor lighting, or irrigation that is affixed to the sidewalk or ground, and the City needs to access infrastructure located beneath the permit area, I hereby agree to indemnify and hold harmless the City against all claims, liability, loss, injury, death or damage whatsoever on account of or arising out of the removal of the fixed improvements.

In consideration of the issuance of this Sidewalk Café Revocable Right-Of Way Use Permit, I hereby agree to adhere to all standards or requirements of Ordinance 09-4387 and this application establishing the regulations for sidewalk cafes I acknowledge the need for a clear sidewalk area of at least five feet with no obstructions. I have informed my staff of the clear walkway and cleanliness requirements and I understand that if is found that a walking path of four feet is not maintained, the City may issue a fined or revoke the permit.

There shall be no live entertainment, amplified music, or mechanically amplified sound of any nature whatsoever within the permit area.

The permittee shall be solely responsible for maintaining the permit area in a clean and sanitary condition. The permittee shall immediately remove trash or debris resulting from the operation of the sidewalk cafe and shall collect and properly dispose of such debris as may be scattered from the permit area by patrons or weather conditions Failure to do so could result in termination of permit.

In the CT and Commercial Storefront (CSD) zone district, all patrons of sidewalk cafes shall vacate the permit area no later than 11:00 p.m. on Sunday through Thursday, inclusive, except the day prior to a holiday or 11:59 p.m. on Friday, Saturday and the day prior to a holiday.

A copy of the permit (may be a reduced size) will be visible at all times the café is in operation.

**Signed** this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Signature of Property Owner, Lessee, Contract Purchaser, or Applicant [Circle One]

FOR OFFICE USE ONLY APPLICATION NO: _____
NO. OF CHAIRS: _____ NO. OF TABLES: _____ S.F. OF CAFÉ AREA _____

**APPROVALS:**

The City Engineer hereby certifies that this application for a sidewalk café is in compliance with each of the design standards and performance standards of Chapter 30-22. The Sidewalk Café Revocable Provisional Use Permit is hereby issued and expires December 31, 20____.	
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Date _____	_____ Alexandrea DavisShaw, P.E., City Engineer
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The Director of Building, Zoning & Code Compliance hereby certifies that the zoning of the real property on which the support business is located is _____ and that zoning allows for a restaurant.	
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Date _____	_____ Timothy Litchet, Director
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The Risk Manager, hereby certifies that the proof of insurance, as attached hereto for the sidewalk café, meets the requirements of Section 30-22 of the City Code	
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Date _____	_____ Larry Hobbs, Risk Manager
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The Finance Director hereby certifies that there are no outstanding fines, fees, taxes, or other charges due and owed to the City by the owners of the real property on which the supported business is located.	
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Date _____	_____ Christopher Lyons, Finance Director
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**THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA  
LONG RANGE PLANNING DEPARTMENT  
SCHOOL CONCURRENCY REVIEW FEES**

**School Capacity Determination**- This preliminary capacity review shall apply to applications for comprehensive plan amendments, rezone petitions and preliminary site plans for proposed residential development. This non-binding review analyzes student generation relative to existing school capacities and capacities planned within the District's current Five-year Capital Facilities Work Plan.

<b>Rezone Petitions</b>	<b>Preliminary Subdivision Plans*</b>	<b>Comprehensive Plan Amendments</b>
<b>\$200</b>	<b>\$200</b>	<b>\$250</b>

**School Concurrency Determination**- This process applies to all final subdivision plats and final site plans for residential development applying for school concurrency and is inclusive as part of the local government's development review process. A local government's final development order or the equivalent must be issued in order for school capacity to be reserved for the project.

<b>Final Site Plan Fees</b>	<b>Number of Units</b>	<b>Final Subdivision Plat Fees</b>
<b>\$500</b>	<b>0-25</b>	<b>\$500</b>
<b>\$1000</b>	<b>26-300</b>	<b>\$1000</b>
<b>\$2000</b>	<b>301-500</b>	<b>\$2000</b>
<b>\$3000</b>	<b>501+</b>	<b>\$3000</b>

**Developments of Regional Impact (DRI)\***

\$5000 deposit

**Large Projects (sub-DRI threshold projects such as DOCC or Villages)\***

\$2500

This fee schedule exempts de minimus projects where, when the student generation rate is applied, the result is that less than one student is generated from the project.

If you have any questions regarding this application, the school concurrency review process or wish to email your application, please contact the School Board's Long Range Planning Office at 941-927-9000 extension 31193.

\*Additional fees may apply to cover staff and attorney review costs for developer agreements.

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**THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA  
LONG RANGE PLANNING DEPARTMENT  
SCHOOL IMPACT ANALYSIS APPLICATION**

**Select type of review being requested:**

\_\_\_\_\_ **School Capacity Determination-** This preliminary capacity review shall apply to applications for comprehensive plan amendments, rezone petitions and preliminary site plans for proposed residential development. This non-binding review analyzes student generation relative to existing school capacities and capacities planned within the District's current Five-year Capital Facilities Work Plan.

\_\_\_\_\_ **School Concurrency Determination-** This process applies to all final subdivision plats and final site plans for residential development applying for school concurrency and is inclusive as part of the local government's development review process. A local government's final development order or the equivalent must be issued in order for school capacity to be reserved for the project.

1. Name of Applicant or Agent: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
Email: \_\_\_\_\_

2. Property Address: \_\_\_\_\_

3. Legal Description including parcel I.D. number(s) and acreage:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Property Zoning: Existing \_\_\_\_\_ Proposed \_\_\_\_\_

5. Future Land Use: Existing \_\_\_\_\_ Proposed \_\_\_\_\_

6. Description of the project including the number and type of dwelling units such as single family or multi family, including any age restricted units or affordable/workforce/attainable housing units and the project phasing schedule if applicable.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Provide the approximate dates of: start of construction, initial occupancy and build out; anticipated resident mix; proposed price range of the units.

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8. Provide the anticipated resident mix and proposed price range of the units.

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9. Provide a location map of the project that identifies the streets adjacent to and surrounding the site.

10. Provide a copy of the proposed site plan layout of the project showing phase lines (if applicable).

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date

Please submit the completed application signed with all required materials and the appropriate fees see attached fee schedule) to:

School Board of Sarasota County  
Long Range Planning Department  
7895 Fruitville Road  
Sarasota, Florida 34240

If you have any questions regarding this application, the school concurrency review process or wish to email your application, please contact the School Board's Long Range Planning Office at 941-927-9000 extension 31193.

**FOR STAFF USE ONLY**

**Reviewing Government** \_\_\_\_\_

**Case Planner** \_\_\_\_\_

**Agency Submittal number** \_\_\_\_\_

**Governmental Agency approval date** \_\_\_\_\_

**Number of Units Approved for Concurrency Reservation** \_\_\_\_\_

**Expiration Date of Reservation (if applicable)** \_\_\_\_\_



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

**Designation of a Regional Activity Center  
or Urban Central Business District**

1. Please indicate whether you are seeking the expedited process or wish the application to be submitted as part of the annual process for amending the City's Comprehensive Plan. Please see the General Information Packet for additional information concerning the two processes.
2. Please list the following:
  - a. The Future Land Use Map Classification(s) within the proposed boundary.
  - b. The Zoning District(s) within the proposed boundary.
  - c. The proposed land uses within the boundary.
3. Please explain the reason(s) for seeking designation of a Regional Activity Center or Urban Central Business District.

**For a Regional Activity Center Application**

Please submit data and analyses to demonstrate a finding that the proposed area for the Regional Activity Center meets the following criteria:

- a. is consistent with the Sarasota City Plan and Future Land Use Map densities and intensities.
- b. is a compact, high intensity, high density multi-use area designated as appropriate for intensive growth by the City of Sarasota and may include: retail; office; cultural, recreational and entertainment facilities; hotels and motels; or appropriate industrial activities.
- c. shall routinely provide service to, or be regularly used by, a significant number of citizens of more than one county.
- d. contains adequate existing public facilities as defined in Chapter 9J-5, Florida Administrative Code, or committed public facilities as identified in the Capital Improvements Chapter, Sarasota City Plan.
- e. is proximate and accessible to interstate or major arterial roadways.

**For an Urban Central Business District Application**

Please submit data and analyses to demonstrate a finding that the proposed area for the Urban Central Business District meets the following criteria:

- a. is consistent with the Sarasota City Plan and Future Land Use Map densities and intensities.
- b. is the single urban core area of a municipality with a population of 25,000 or greater, located within an urbanized area as identified by the 1990 Census (1990 U.S. Department of Commerce, Bureau of Census publication, Census of Population and Housing Unit Counts (1990 CPH-2) maps, Report No. 11 for the State of Florida).
- c. contains mass transit service as defined in Chapter 9J-5, Florida Administrative Code.
- d. shall contain high intensity, high density multi-use development which may include any of the following: retail; office, including professional and governmental offices; cultural, recreational, and entertainment facilities; high density residential; hotels and motels; or appropriate industrial activities.
- e. contains adequate existing public facilities as defined in Chapter 9J-5, Florida Administrative Code, or committed public facilities as identified in the Capital Improvements Chapter, Sarasota City Plan.



CITY OF SARASOTA  
**DEVELOPMENT APPLICATION**

## Request for Tax Increment Financing (TIF) Funds

[Use additional sheets as necessary]

<b>TIF Assistance Requested</b>	
Dollar Amount Requested:	\$
Purpose of Request:	
Justification for Request.	
Without TIF \$ Project would:	<input type="checkbox"/> Proceed utilizing other financing <input type="checkbox"/> Proceed in some alternative form <input type="checkbox"/> Not proceed at all
What proposed method will be used to finance the TIF revenue stream.	<input type="checkbox"/> Pay-as-you-go Note issued by the CRA to the Applicant <input type="checkbox"/> CRA issued revenue Notes sold to investor(s) <input type="checkbox"/> City issued general obligation Bonds sold to investors <input type="checkbox"/> Other [explain].
Describe the source, amount and necessity of other requested public financial assistance.	
Describe the Proposed Project: <ul style="list-style-type: none"> <li>• Use [retail, office, industrial, housing-ownership or rental]</li> <li>• Sale, lease, or rental rates</li> <li>• Number and size [sq. ft. &amp; height] of structure(s) and units</li> <li>• New construction, Renovation, Demolition</li> <li>• Type of construction and materials</li> <li>• Interior and exterior finishes</li> <li>• Details of Sign Leases</li> <li>• List of utilities included in rent</li> <li>• Historic Structures, if any</li> <li>• Environmental Issues</li> </ul>	
Describe representative projects of a similar scale/character completed by the applicant. Describe the role of individual team members.	
Projected Number of Jobs Created and/or Retained: <ul style="list-style-type: none"> <li>• Full-Time, Part-Time, Seasonal</li> <li>• # of <b>Living Wage</b> Jobs</li> </ul>	

**Additional materials to be submitted:**

- A brief history and description of the Applicant's business
- Audited financial or corporate financial reports demonstrating the Applicant's financial ability to guarantee completion of the project.
- A list of references for lead team members including contact names, address, telephone and facsimile numbers.
- Market Studies if completed or underway