



**CITY OF WINTER HAVEN
APPLICATION FOR HEARING
BY THE DEVELOPMENT SPECIAL MAGISTRATE**
451 Third Street, NW Winter Haven, FL 33881 863-291-5600

The following information is required for submission of an application for a variance. The Development Special Magistrate normally meets the third Friday of each month at 11:00 a.m. to consider such requests. It is important that all information be complete and accurate when submitted to the City.

Required Contact Information

Name of Applicant/Property Owner: _____

Mailing Address: _____

Phone (Work): _____ Phone (Home): _____

E-Mail: _____

Required Property Information

Zoning of Property: _____ Future Land Use of Property: _____

Location of Property: _____

Parcel Identification Number: _____

Legal Description of the Property (attach metes and bounds description if applicable):

Requested Variance(s):

- 1. _____
- 2. _____
- 3. _____
- 4. _____

For City Use Only:	
Application Deadline: _____	Hearing Date: _____
Date Received: _____	Received By: _____
Fee Received: _____	Receipt Number: _____
Case Number: _____	Date Accepted: _____

The following questions must be answered by the Applicant. Per Section 21-422 of the Winter Haven Code of Ordinances, the Development Special Magistrate can grant no variance unless it finds that ALL the following grounds or circumstances exist:

1. Please specify any special conditions and circumstances, that exist which are peculiar to the land (property, lot, parcel, etc.), structure, or building involved and that are not applicable to other lands, structures, or buildings in the same zoning district.

2. Do the special conditions and circumstances exist as a result of the actions of the applicant?

3. If the requested variance is approved, will the variance confer on the applicant, any special privilege that is denied by the provisions of the City's Code to other lands, buildings, or structures in the same land use classification?

4. How would the literal interpretation of the provisions of the City's Code deprive the applicant of rights commonly enjoyed by other properties in the identical zoning district? How will it constitute an unnecessary and undue hardship on the applicant?

5. What is the minimum variance necessary to make possible a reasonable use of the land, building or structure?

The owner of the property subject to this application, and will be presenting the request, complete the following:

(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) have familiarized (myself) (ourselves) with the rules and regulations of the Development Special Magistrate with respect to preparing and filing this petition and that the foregoing statements and answers herein contained and other information attached hereto present the arguments in behalf of the petition herein requested to the best of (my) (our) ability and that the statement and information above referred to are in all respects true and correct to the best of (my) (our) knowledge and belief.

Signed: _____ Date: _____

Signed: _____ Date: _____

Signed: _____ Date: _____

STATE OF FLORIDA:
COUNTY OF POLK:

The foregoing instrument was acknowledged before me this ____ day of _____, 20____,
by _____, who (is) (are) personally known to me or who (has) (have)
produced _____ as identification and who (did) (did not) take an oath.

Signature of Notary Public

Typed or Printed Name of Notary Public

If you are an agent representing the owner of the subject property, complete the following:

(I) (WE), _____, as the property owner(s) and _____, as the property owner's authorized agent, state that the information contained in this application is true, accurate and correct, and give our permission and consent to the City of Winter Haven to submit and process this application on our behalf.

Property Owner(s) Signature:

Signed: _____ Date: _____ Signed: _____ Date: _____

STATE OF FLORIDA:
COUNTY OF POLK:

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who (is) (are) personally known to me or who (has) (have) produced _____ as identification and who (did) (did not) take an oath.

Signature of Notary Public

Typed or Printed Name of Notary Public

Agent Signature: _____ Date: _____

Agent Signature: _____ Date: _____

STATE OF FLORIDA:
COUNTY OF POLK:

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who (is) (are) personally known to me or who (has) (have) produced _____ as identification and who (did) (did not) take an oath.

Signature of Notary Public

Typed or Printed Name of Notary Public

ADDITIONAL INSTRUCTIONS AND EXHIBITS

- Applicants are welcome and encouraged to contact Planning staff at (863) 291-5600 from 8:00 a.m. to 5:00 p.m. Monday through Friday to discuss any questions they may have concerning the variance application and hearing process. It is also helpful, but not required, to schedule an application submission time with the Planning staff so they can work with you to explain the variance application review and hearing process. We want to ensure that all applicants understand the review process, the Development Special Magistrate meeting schedule and that variance applications must be complete upon submission. Accomplishing these tasks helps both the public and city staff to work together smoothly.
- Applicants should answer all six variance criteria questions on pages 2 and 3 to the best of their ability, since these criteria are used by the Development Special Magistrate (DSM) as the basis for granting or denying a variance request. You must demonstrate to the DSM that you meet all six criteria to be able to obtain a variance approval.
- Please be advised that application fees are normally nonrefundable. Application fees are used to help offset the cost of mailing hearing notices to the public, advertising the case in the newspaper and application review/processing costs.
- Also be advised that the Development Special Magistrate meets on an as needed basis, normally on the third Friday of the month. The normal meeting time is 11:00 a.m. Development Special Magistrate meetings are open to the public and are held in the John Fuller Auditorium in the Winter Haven City Hall, located at 451 3rd St. NW, Winter Haven, FL. Applications are due five (5) weeks prior to the requested meeting date.
- Please come prepared to fully explain your request to the Development Special Magistrate and to answer questions concerning your application. Applicants may also appoint an authorized agent to act fully on their behalf using the attached authorization form. City staff will contact you by mail or phone prior to the applicable Development Special Magistrate meeting to inform you of your meeting date and time. You may also request a copy of the city staff's staff report prior to the meeting for your use. The staff report is generally available three (3) days prior to the meeting.

PLEASE SUBMIT THE FOLLOWING REQUIRED EXHIBITS:

- A completed application signed by the property owner and/or authorized agent, if applicable.
- A check or money order, payable to the City of Winter Haven to pay the required application fee. Please contact the Planning staff for the current application fee amount.
- A property survey or scaled-drawing for properties or parcels containing a building or structure when such building or structure will be affected by a proposed variance request. The survey or scaled-drawing will be used to help determine the location, nature, and relative impacts of the proposed building or structure variance request.
- For vacant properties, a property survey or surveyor's sketch of property description or scaled-drawing of the property showing the property boundaries, proposed buildings or structures involved and other information needed to illustrate the requested variance(s) is needed. Please contact the Planning Department to determine the most appropriate way to illustrate and explain your request prior to application submission.