



City of Apopka
Community Development Department
120 E. Main Street
P. O. Box 1229
Apopka, Florida 32704-1229
407-703-1739 - Phone -- 407-703-1791 - Fax

-- FOR OFFICIAL USE ONLY--	
DATE SUBMITTED:	
FEE PAID: \$	
CHECK #:	
RECEIPT #:	

APPLICATION FOR SUBDIVISION DEVELOPMENT PLAN

REQUEST	
	Preliminary Development Plan
	Final Development Plan
	Replat
	Revision to Development Plan
	Resubmittal

Project Name:			
Engineer/Project Representative Information:			
Company Name:			
Engineer Name:			
Street Address:			
City:		State:	Zip:
Phone:	Fax:	E-mail:	
Owner Information:			
Owner Name:			
Street Address:			
City:		State:	Zip:
Phone:	Fax:	E-mail:	
Property Information			
Parcel I.D. #(s):		Future Land Use:	
Address:		Zoning:	
Size (acres):		Number/Type of Units:	
Existing Use:		Proposed Use:	

Items required for Development Plan Review Submittal:

1. Submittal deadline: 4:00 p.m. the first working day of each month.
2. Application fee: Non-refundable.
3. Typed, completed site plan application.
4. Completed application for a Concurrency Verification Letter.
5. Seven (7) complete sets of plans, signed and sealed by an engineer.
6. Property owner's notarized authorization.

Cost Schedule:

- | | |
|---|----------|
| 1. _____ Preliminary Development Plan (3 submittals) | \$500.00 |
| 2. _____ Final Development Plan (3 submittals)..... | \$400.00 |
| 3. _____ Per Unit Fee | \$ 15.00 |
| 4. _____ Revision to a Development Plan (each submittal)..... | \$100.00 |
| 5. _____ Resubmittal (1/2 original fee per submittal after 3 submittals)..... | \$\$\$ |

Plans requiring resubmittal and not submitted within sixty (60) days shall be considered expired.

CERTIFICATION AND SIGNATURE

<i>Please acknowledge by INITIALING next to each statement.</i>	
	Application is hereby made for review and approval of the above named project.
	I/we am/are the owner(s) of the property or an authorized legal representative of the owner(s).
	I/we understand that further approvals, modifications to the plans, or certain conditions of approval may be required before final approval is granted.
	I/we understand that abutting or adjacent property owners may be notified of my/our application and may express their opinions regarding the proposed project by public hearing.
	I/we have read the Land Development Code requirements and procedures. If my/our submittal is not complete, I/we understand it will not be reviewed.
	I/we understand that Development plans and plats or replats are subject to the City's Land Development Code, Development Design Guidelines, and policies of the City's Comprehensive Plan, and that all development or property affected by this application must be consistent before approval can be granted.
	I/we understand that all personal financial commitments regarding the sale or development of this project or property are, or will be, made independent of the approval process and the schedules of the City of Apopka, Florida.
	I/we understand that all plan approvals will become null and void after twelve (12) months if no further project activity occurs.
	I/we understand that all application fees are not refundable.
	I/we understand that approval of this plan does not permit any waiver of the City's Codes unless a waiver is specifically requested in writing and approved.
	I/we understand if the project requires a TRAFFIC STUDY it may delay the scheduled Development Plan approval date.
	I/we, the undersigned, have read the above information and have full understanding of the same.
	I/we, the undersigned owner(s) for the subdivision of the above described property in the City of Apopka, Florida, do hereby agree to Indemnify and Hold Harmless the City of Apopka, Florida, its elected officials, officers, agents, and assigns for any and all damages, attorney fees and costs incurred by said City in any instance in which the City must expend funds and/or defend its decisions regarding the granting of the above referenced application.

BY: _____
Owner(s) of Record (Signature)

BY: _____
Owner(s) of Record (Signature)

STATE OF FLORIDA
COUNTY OF ORANGE

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

Notary Public (Signature)

My Commission Expires: _____

Notary Public (Print Name)