

## LEVEL 4 LAND DEVELOPMENT CODE COMPREHENSIVE PLAN AMENDMENT APPLICATION

## Office of Planning and Development Land Development Division

330 W. Church St. P.O. Box 9005, Drawer GM03 Bartow, FL 33831-9005 Phone (863)534-6792 FAX (863) 534-6407

## TYPE OF AMENDMENT

| Land Developm   | eent Code ( ) Text           | ( ) Sub-district                     |                      |  |  |  |  |
|---|------------------------------|--------------------------------------|----------------------|--|--|--|--|
| Comprehensive Plan ( ) Text ( ) Large Scale Map ( ) Small Scale Map |                              |                                      |                      |  |  |  |  |
| Is property in a  | Selected Area Plan (SAP)     | ( ) Yes ( ) No                       |                      |  |  |  |  |
| SAP Name  |                              |                                      |                      |  |  |  |  |
| Pre Application Project # (Required)                                |                              |                                      |                      |  |  |  |  |
|   | Owner                        | Applicant                            | Contact Person       |  |  |  |  |
| Name  |                              |                                      |                      |  |  |  |  |
| Work Number   |                              |                                      |                      |  |  |  |  |
| Fax Number  |                              |                                      |                      |  |  |  |  |
| Mailing<br>Address  |                              |                                      |                      |  |  |  |  |
| Email   |                              |                                      |                      |  |  |  |  |
|   | If additional contacts, plea | se list on a separate sheet and subm | it with application. |  |  |  |  |
| Brief Descriptio  | on Request (No more than 250 | characters):                         |                      |  |  |  |  |
|   |                              |                                      |                      |  |  |  |  |
|   |                              |                                      | ·                    |  |  |  |  |
|   |                              |                                      | <u>.</u>             |  |  |  |  |
|   |                              |                                      | <u>.</u>             |  |  |  |  |
|   |                              |                                      | <u>.</u>             |  |  |  |  |
|   |                              |                                      |                      |  |  |  |  |

| Request     | From:         |          |            |           |               | Land Use/Sub-District             |  |
|-------------|---------------|----------|------------|-----------|---------------|-----------------------------------|--|
|             | To:           |          |            |           |               | Land Use/Sub-District             |  |
|             | Acreage: _    | Acreage: |            |           |               |                                   |  |
|             |               | Range    | - Township | - Section | Subdivision # | - Parcel #                        |  |
| Parcel ID N | Number(s):    | R        | T          | S         |               | -<br>ment)                        |  |
|             |               |          |            |           |               |                                   |  |
|             |               |          |            |           |               | -                                 |  |
|             |               | <u>R</u> | T          | S         |               | -                                 |  |
|             |               | R        | T          | S         |               | <del>-</del>                      |  |
|             | d Location of |          |            |           |               |                                   |  |
|             |               |          |            |           |               |                                   |  |
| Water Provi | ider Name and | Phone Nu | ımber:     |           |               |                                   |  |
| Sewer Provi | ider Name and | Phone No | umber:     |           |               |                                   |  |
| ( ) Yes (   | ,             | 1 1      | •          |           | 1             | ritical State Concern? (If yes, a |  |

| Identify existing uses and structures (approx. square feet, etc.):  | on subject and surrounding properties   | (e.g. vacant, residential # du/ac, commercial  |
|---|---|--|
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| NW  | N   | NE   |
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|   |   |  |
| ${f w}$   | Cubicat Duonautu  | E  |
| VV  | Subject Property  | E  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
| sw  | S   | SE   |
| Code, the Polk County Comprehensive this application, nor does approval we Prevention Code, or any other applications | waive any other applicable provisions we Plan, the Polk County Utility Code vaive any applicable Florida Statutes, able laws, rules, or ordinances, whether to be informed of and be in compliance.   | which are not part of the request for<br>Florida Building Code, Florida Fir<br>or federal, state or local. The applican          |
| application, or the authorized representatives of Polk Countains inspections or site visits necessary                 | (print name), the owner of the tative of owner of the property which is the ty to enter onto the property which is the try for reviewing this application. I use structures dwellings which may be on the try for the try for reviewing this application. | s the subject of this application, hereby<br>ne subject of this application to perform<br>nderstand that representatives of Poll |
| John B. Allen   |   |  |
| Property owner or property owner's au   | thorized representative.  | Date:  |