

**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 Development 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		James Tully	Erik PEtersen
Work Number		863-298-4238	863-534-6470
Fax Number			
Mailing Address		1011 Jim Keene Boulevard Winter Haven	330 W. Church St. Bartow
Email		jamestully@polk-county.net	erikpeterson@polk-county.net

If additional contacts, please list on a separate sheet and submit with application.

Brief Description Request *(No more than 250 characters):*

LDC text amendment to allow a development to utilize three alternative water sources to provide irrigation services within a development in an area where reclaimed water is available.

Request From: _____ Land Use/Sub-District

To: _____ Land Use/Sub-District

Acreage: _____

	Range - Township - Section	Subdivision #	-	Parcel #
Parcel ID Number(s):	R T S		-	_____.
	<i>(Include others on a separate attachment)</i>			
	R T S		-	_____.
	R T S		-	_____.

Address and Location of Property:

Water Provider Name and Phone Number: _____.

Sewer Provider Name and Phone Number: _____.

() Yes () No Is the property located in the Green Swamp Area of Critical State Concern? *(If yes, a Green Swamp Impact Assessment Statement must be submitted with this application.)*

Identify existing uses and structures on subject and surrounding properties (e.g. vacant, residential # du/ac, commercial approx. square feet, etc.):

NW	N	NE
W	Subject Property	E
SW	S	SE

Approval of this application does not waive any other applicable provisions of the Polk County Land Development Code, the Polk County Comprehensive Plan, the Polk County Utility Code which are not part of the request for this application, nor does approval waive any applicable Florida Statutes, Florida Building Code, Florida Fire Prevention Code, or any other applicable laws, rules, or ordinances, whether federal, state or local. The applicant has the obligation and responsibility to be informed of and be in compliance with all applicable laws, rules, codes and ordinances.

I, _____ (print name), the owner of the property which is the subject of this application, or the authorized representative of owner of the property which is the subject of this application, hereby authorize representatives of Polk County to enter onto the property which is the subject of this application to perform any inspections or site visits necessary for reviewing this application. I understand that representatives of Polk County are not authorized to enter any structures dwellings which may be on the property.

Property owner or property owner's authorized representative.

Date:



www.polk-county.net

**LEVEL 4
LAND DEVELOPMENT CODE &
COMPREHENSIVE PLAN AMENDMENT
REQUIRED SUBMITTAL DOCUMENTS
AND APPLICATION SUBMITTAL
INSTRUCTIONS**

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330 W. Church St.
P.O. Box 9005, Drawer GM03
Bartow, FL 33831-9005
(863)534-6449
FAX (863) 534-5908

DOCUMENTS REQUIRED

Land Development Division: Official Records

- Level 4 CPA/LDC Review Application
- Demonstration of Need (Form GM CP 2.102)
- Impact Assessment Statement (Form LDC 910)
- Green Swamp Impact Assessment Statement (if applicable) (Form GM LDC 501)
- Legal description
- Deed (copies only)
- Owner authorization letter (if applicable)

APPLICATION AND PLANS SUBITTAL INSTRUCTIONS

Polk County's Development Review Process is now electronic. Please, follow the steps below.

- 1. Submit the only Application (Form # GM LDC 907) using one of the following methods:**
 - a. Email to Projectsubmittal@polk-county.net;
 - b. Fax to 863-534-5908; or
 - c. Deliver or mail to address above.
- 2. Pay applicable fees by:**
 - a. Check (Made out to Polk County BoCC),
 - b. Cash; or
 - c. Credit Card (Master Card, American Express and Discover).
- 3. Submit plans and all required supporting documents (as noted below)**
 - a. Electronic submittal via ePlan (instructions found in user guide at www.polk-county.net/eplan)
 - b. CD - Follow ePlan instructions at above link for file types and naming conventions
 - c. Deliver or mail to address above. Plans are to be ROLLED (not folded) so that they can be scanned into our electronic review system.