

**CITY OF EDGEWATER
PLANNING & ZONING**

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Edgewater, Florida 32132

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**ZONING MAP AMENDMENT RPUD –
APPLICATION**

OFFICE USE ONLY

DATE APPLICATION RECEIVED: _____

CASE NO. _____

ZONING MAP _____

To PUD - \$750

Other - \$500

APPLICANT NAME _____

MAILING ADDRESS _____

PHONE NUMBERS: HOME _____ WORK _____

FAX NUMBER: _____

OWNER'S NAME (if different from applicant) _____

MAILING ADDRESS _____

PHONE _____

PARCEL # _____

STREET ADDRESS FOR PROPOSED RECLASSIFIED PROPERTY (if applicable) _____

APPLICANT'S INTEREST IN SUBJECT PROPERTY _____

REQUESTED AMENDMENT _____

TOTAL AREA OF PROPERTY: (square feet or acres) _____

Pursuant to Chapter 286, F.S., if an individual decides to appeal any decision made with respect to any matter considered at a meeting or hearing, that individual will need a record of the proceedings and will need to insure that a verbatim record of the proceeding is made. The City does not prepare or provide such record.

PLEASE SUBMIT YOUR APPLICATION ACCURATELY WITH A COMPLETED CHECKLIST AND ALL REQUIRED ATTACHMENTS. SUBMISSION OF AN INCOMPLETE APPLICATION WILL DELAY PUBLIC HEARINGS

Zoning Map Amendment applicants must resubmit plans in response to TRC (Technical Review Committee) comments within 30-days of the TRC meeting or comments being provided to the applicant. Failure to meet the resubmission deadlines shall require the applicant to file a new application including the appropriate review fees.

I have read and agree to the terms and conditions set forth in this application.

SIGNATURE OF OWNER _____

DATE _____

SIGNATURE OF APPLICANT _____

DATE _____

THE CITY OF EDGEWATER

NOTARIZED AUTHORIZATION OF OWNER

I/we _____ (owner's name) as the sole or joint fee simple title holder(s) of the property described as: _____

_____ (legal description and parcel number)

authorize _____ to act as my agent to seek a _____ (type of request) on the above referenced property.

Owner's Signature

Owner's Signature

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me on this _____ (date) by _____ (name of person acknowledging), who is personally known to me or who has produced _____ (type of ID) as identification and who did not take an oath.

NOTARY PUBLIC – STATE OF FLORIDA

NAME OF NOTARY – TYPED OR PRINTED

COMMISSION # _____

ZONING MAP AMENDMENT CHECKLIST

Required attachments:

- 1. Current Warranty Deed
- 2. Two (2) signed and sealed surveys certified by a Florida licensed and insured PLS within one (1) year of the filing of the application as reflecting all improvements and conditions on the property.
- 3. An explanation of the specific amendment to the Official Zoning Map.
- 4. Volusia County School District Development Information Summary form (to be completed if request will increase residential density).
- 5. One (1) digital copy of all supplemental materials.

NOTE: IF THE SUBJECT PROPERTY IS IN JOINT OR MULTIPLE OWNERSHIP, YOU MUST PROVIDE SIGNATURES OF ALL OWNERS OF THE REAL PROPERTY WHOSE PROPERTY WOULD BE RECLASSIFIED BY THE PROPOSED AMENDMENT, GIVING THEIR CONSENT TO THE FILING OF THE APPLICATION.

CITY OF EDGEWATER

AGREEMENT FOR CONSULTANT, ENGINEERING, PLANNING, ENVIRONMENTAL, LEGAL, ADVERTISING COSTS & ON-SITE INSPECTIONS

The City of Edgewater contracts for certain consultant, engineering, planning, environmental and legal services related to its review of development projects. All fees charged by any such consultant, engineering, planning, environmental, on-site inspections and/or legal service providers are required to be paid by the **owner/applicant**. In addition, the **owner/applicant** is required to pay all advertising and recording costs in connection with application submitted by the undersigned.

The undersigned agrees that it shall be liable to the City for one hundred percent (100%) of the actual costs, both direct and indirect, of coordinating and reviewing the application submitted by the undersigned, including, but not limited to, the following:

Engineering Review and Approval Fees

Planning Consultant Fees

On Site Inspection and Approval Fees

Legal Fees

Advertising Costs

Recording Costs

The owner/applicant does hereby acknowledge that on-site inspections by City staff, consultants, elected and appointed officials are permitted on said property.

The undersigned agrees to pay the above-referenced fees within thirty (30) days of receipt of an invoice for same and further agrees to pay to the City interest on the unpaid balance at the rate of one percent (1%) per month for any fees not remitted within thirty (30) days of receipt of an invoice for same. No Development Order or Certificates of Occupancy will be issued until all of the above-referenced fees are paid in full.

OWNER/APPLICANT:

By: _____

Printed Name: _____

Title: _____

Date: _____

PROPOSED RPUD (RESIDENTIAL PLANNED UNIT DEVELOPMENT) INFORMATION

1. Development Name: _____
2. Total site acreage: _____
3. Acreage within 100-year flood plain: _____
4. Net density* of project: _____
5. Number of proposed lots:
 - a. Single-Family: _____
 - b. Multi-Family: _____
6. Maximum percentage building coverage: _____
7. Maximum percentage impervious coverage: _____
8. Minimum lot size:
 - a. Single-Family:
 - i. Area (square feet): _____
 - ii. Lot depth: _____
 - iii. Lot width: _____
 - b. Multi-Family:
 - i. Area (square feet): _____
 - ii. Lot depth: _____
 - iii. Lot width: _____
9. Minimum house square footage: _____
10. Minimum setbacks (in feet):
 - a. Front: _____
 - b. Rear: _____
 - c. Side: _____
 - d. Side corner: _____
 - e. Maximum height: _____
 - f. Utility Easements - _____ front, _____ sides

g. Swimming Pools Rear _____ from property line to pool deck edge

Side _____ from property line to pool deck edge

11. Right-of-Way width and point of connection: _____

12. Acreage of stormwater retention ponds: _____

13. Location and size of any proposed signage: _____

14. Location and ROW width of entrance, include any turn lanes that may be required: _____

15. Model Homes:

a. Number proposed: _____

b. Lot numbers on which model homes are to be located: _____

16. Existing or proposed City Future Land Use Designation: _____

17. Point of connection for City Potable Water Service: _____

18. Recreational Facilities:

a. Location(s): _____

b. Size: _____

c. Type of Facilities: _____

19. Total acreage of Open Space** as dedicated to the HOA: _____

Any further information pertaining to the RPUD Agreement – please use a separate sheet.

***NET DENSITY means the number of dwelling units per acre of land devoted to residential uses and excludes right-of-ways, wetlands and lands below the 100-year flood plain.**

****OPEN SPACE means any parcel or area of land or water set aside, reserved or dedicated for the use and enjoyment of all owners and occupants of the project. Usable common space shall include area(s) readily accessible and generally acceptable for active or passive recreational use. Open space shall not include required setback areas, contain structures, impervious surfaces, or right-of-ways other than those intended for landscape or recreational purposes.**