

City of Lake Alfred
120 E. Pomelo Street
Lake Alfred, FL 33850



Phone: (863) 291-5748

www.mylakealfred.com

Community Development

Building | Code Enforcement | Planning | Zoning

Planning Applications

Name of Project: _____

Property Information

Property Address or General Location: _____

Present Use of the Property: _____

Existing Structures Located on the Site: _____

Total Acreage: _____ Number/Type of Structures: _____

Developable Acreage (excluding wetlands or waterways): _____

Parcel I.D. #: _____ - _____ - _____

Land Use and Zoning Information

Future Land Use Designation: _____ Zoning District: _____

Is the property within an Overlay District? Yes _____ No

Is the property within the Green Swamp Area of Critical State Concern? Yes No

Review Type

(Attach checklist for review type.)

Legislative Review:

Future Land Use Map Amendment Comprehensive Plan Text Amendment

Zoning Map Amendment ULDC Text Amendment

Subdivision: Lot Split Minor Plat/Replat Replat Platted Subdivision

Site Development Plan: Change of Use Conditional Use PUD

Agreement Site Plan Modification

Construction Plans:

Relief: Administrative Waiver Variance Special Exception

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City Use Only

Date Received: _____ Received By: _____ Fee Paid: _____

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Owners' Authorization

Name of Project: _____

(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) authorize the City of Lake Alfred to process this application, in accordance with all adopted City rules and regulations, and in conformance with State law.

Further, the undersigned (has) (have) appointed and (does) (do) appoint _____ as agent(s) to execute any petitions or other documents necessary to affect such petition; and request that the City of Lake Alfred accept the signature of my agent(s) as representing my agreement of all terms and conditions of the approval process:

Further, (I) (we) or any agent or lessee of the subject property authorized by (me) (us) to file this petition, deposes and say that the statements and answers contained in the application and any information attached thereto, present the arguments on behalf of this petition to the best of (my) (our) ability; and that the statements and information referred to above are in all respects true and correct to the best of (my) (our) knowledge and belief.

Owner's Signature/ /
Print Title

Owner's Signature/ /
Print Title

Printed Name of Owner

Printed Name of Owner

Address: _____

Email:

Email:

Phone #:

Phone #:

STATE OF FLORIDA
COUNTY OF _____.

OATH OR AFFIRMATION

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this _____ day of _____, 20____, by _____ (owner(s) listed above). Personally Known ___ or Produced Identification ___.

SEAL

Signature of Notary Public – State of Florida
Print or Stamp Name of Notary

