



The Department of Planning, Zoning, and Development Subdivision & Lot Requests Application

You must set up a pre-application meeting **before** submitting your application.

The following background information is required to schedule a pre-application meeting. The City of DeBary will use this to research the project site in preparation for the meeting. Although this is the minimal amount of background material required, more information is welcome. Please reference the list of Required/Recommended Pre-Application Materials. Please attach additional sheets or plans as needed.

APPLICANT

Name: _____
Address: _____
City/State/Zip: _____
Phone: _____ Fax: _____
E-Mail Address: _____
Contact Person: _____

OWNER

Name: _____
Address: _____
City/State/Zip: _____
Phone: _____ Fax: _____
E-Mail Address: _____
Contact Person: _____

Applicant is: Owner Attorney for Owner* Agent for Owner* Contract Purchaser*

Pre-Application Conference held on _____

PROJECT INFORMATION

Project Name: _____
Address of parcel: _____
Parcel ID Number(s): _____
Size of parcel: _____
Existing zoning: _____
Existing Use of Property: _____

TYPE OF APPLICATION: (Check one)

- LOT COMBINATION** – to combine lots for a building site
- EXEMPT LOT COMBINATION** – a combination of lots by a prior building permit
- LOT LINE ADJUSTMENT** - to move an existing lot line
(If the combination/adjustment is between two or more property owners, then the proper conveyances must be filed of record prior to final approval)
- SUBDIVISION** – to create 4 lots or less and each lot is 2.5 acres – 10 acres, 10,000 sq. ft. and access must be demonstrated to be out of the 100-year flood plain. The City of DeBary will not responsible for the maintenance of any new easements or roads.

Utility: Private Septic/Well by _____ Central Sewer/Water by _____
 Other by _____

***If you are not the property owner, you must have the owner complete the Notarized Authorization of Owner form.**



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APPLICATION WILL NOT BE ACCEPTED UNLESS ALL OF THE FOLLOWING ARE ATTACHED:

- Fee _____, Check # _____ (All deposits & fees should be made payable to the City of DeBary **Please provide a breakdown of fees**)
- 1 Signed and Notarized Development Reimbursement Form
- 1 Copy: A notarized authorization form from the owner or an attorney representing the owner.
- 6 Sets: **Signed and sealed surveys** of the property (no more than 2 years old) prepared by a Florida Registered Land Surveyor.
- For 10 acres and greater lots – the survey sketch must show flood plain, wetlands and legal access (existing or proposed).

NOTE: Prior to submitting this application, it is advised that you contact the Health Department for information on septic tank permitting requirements.

STAFF USE ONLY

Planner's Comments/Notes: _____

_____ Notifications Discussed
Date Submitted: _____ Taken By: _____ Time: _____ a.m. /p.m.

Violation(s): _____
PA Meeting Date: _____
EMD Required: YES NO
N/C Lot Letter Required: _____
Other: _____