



# The Department of Planning, Zoning, and Development Plan 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.

Type of Application:     Sketch Plan     Overall Development Plan     Conceptual Site Plan

### APPLICANT

### OWNER

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

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: \_\_\_\_\_

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.
- 2   **Signed and sealed surveys** of the property (no more than 2 years old) prepared by a Florida Registered Land Surveyor.
- 1   Copy: Pre-Application Meeting Form
- 1   Copy: Non-Conforming lot letter if applicable.
- 2   Copy: **Legal description** (furnished on CD – Microsoft Word, if possible)
- 1   Copy: Copy of Deed(s)
- 1   Written Description of Request
- 1   **CD with all Supplemental materials MUST be submitted.**

You will **ALSO** need to provide the following information at the **TIME OF SUBMISSION**:

- Cover Letter addressing any outstanding comments must be submitted **and** items below.
- CPN**
  - 1   Sets: Schematic representation with proposed buildings, vehicle circulation and parking
  - 1   Non-Concurrency Affidavit
- SKP/ODP**
  - 1   Sets: Schematic plans meeting the requirements of DeBary LDC Sec. 4-43
  - 1   Non-Concurrency Affidavit



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**PLEASE LIST ALL ENGINEERS AND CONSULTANTS ON PROJECT:**

**ENGINEER**

**CONSULTANT**

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

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

**ENGINEER**

**CONSULTANT**

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

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

**APPLICANT SIGNATURE:** \_\_\_\_\_ **Date** \_\_\_\_\_

**APPLICANT SIGNATURE:** \_\_\_\_\_ **Date** \_\_\_\_\_

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**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: _____