

City of Okeechobee General Services Department 55 S.E. 3 <sup>rd</sup> Avenue, Room 101 Okeechobee, Florida 39974-2903 Phone: (863) 763-3372, ext. 9820 Fax: (863) 763-1686	Date:	Petition No.
	Fee Paid:	Jurisdiction:
	1 <sup>st</sup> Hearing:	2 <sup>nd</sup> Hearing:
	Publication Dates:	
	Notices Mailed:	

## APPLICATION FOR COMPREHENSIVE PLAN AMENDMENT

**TO BE COMPLETED BY CITY STAFF:**

Verified FLUM Designation: \_\_\_\_\_

Verified Zoning Designation: \_\_\_\_\_

- Plan Amendment Type:
- Large Scale (LSA) involving over 10 acres or text amendment
  - Small Scale (SSA) 10 acres or less
  - Small Scale (SSA) More than 10 but less than 20 acres if the proposed amendment will have a positive effect in addressing the problems of low per capita incomes, low average wages, high unemployment, instability of employment, and/or other indices of economically distressed communities.

**APPLICANT PLEASE NOTE:**

Answer all questions completely and accurately. *Please print or type responses.* If additional space is needed, number and attach additional sheets. The total number of sheets in your application is: \_\_\_\_\_.

Submit 1 (one) copy of the complete application and amendment support documentation, including maps, to the General Services Department. Fifteen (15) copies of any documents over 11 X 17 are required to be submitted by the applicant.

I, the undersigned owner or authorized representative, hereby submit this application and the attached amendment support documentation. The information and documents provided are complete and accurate to the best of my knowledge.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner or  
Authorized Representative\*

\*Attach Notarized Letter of Owner's Authorization

**For questions relating to this application packet, call the General Services Dept. at (863) 763-3372, Ext. 9820**

**I. APPLICANT/AGENT/OWNER INFORMATION**

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**Applicant**

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Address

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City

State

Zip

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Telephone Number

Fax Number

E-Mail

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**Agent\***

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Address

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City

State

Zip

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Telephone Number

Fax Number

E-Mail

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**Owner(s) of Record**

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Address

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City

State

Zip

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Telephone Number

Fax Number

E-Mail

Name, address and qualification of additional planners, architects, engineers, environmental consultants, and other professionals providing information contained in this application.

\*This will be the person contacted for all business relative to the application.

**II. REQUESTED CHANGE (Please see Section V. Fee Schedule)**

A. TYPE: (Check appropriate type)

Text Amendment

Future Land Use Map (FLUM) Amendment

B. SUMMARY OF REQUEST (Brief explanation):

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**III. PROPERTY SIZE AND LOCATION OF AFFECTED PROPERTY (for amendments affecting development potential of property)**

A. PROPERTY LOCATION:

1. Site Address: \_\_\_\_\_  
\_\_\_\_\_

2. Property ID #(s): \_\_\_\_\_  
\_\_\_\_\_

B. PROPERTY INFORMATION (Note: Property area should be to the nearest tenth of an acre. For properties of less than one acre, area should be in square feet.)

1. Total Area of Property: \_\_\_\_\_

2. Total Area included in Request: \_\_\_\_\_

a. In each Future Land Use (FLU) Category: \_\_\_\_\_

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(4) \_\_\_\_\_

b. Total Uplands: \_\_\_\_\_

c. Total Wetlands: \_\_\_\_\_

3. Current Zoning: \_\_\_\_\_
4. Current FLU Category: \_\_\_\_\_
5. Existing Land Use: \_\_\_\_\_
6. Requested FLU Category \_\_\_\_\_

**D. MAXIMUM DEVELOPMENT POTENTIAL OF THE SUBJECT PROPERTY**

Development Type	Existing FLU Category	Proposed FLU Category
Residential		
Density (DU/Acre)		
Number of Units		
Commercial (sq. ft.)		
Industrial (sq. ft.)		

**IV. AMENDMENT SUPPORT DOCUMENTATION**

At a minimum, the application shall include the following support data and analysis. These items are based on the submittal requirements of the State of Florida, Department of Community Affairs for a comprehensive plan amendment, and policies contained in the City of Okeechobee Comprehensive Plan. Staff will evaluate this request based on the support documentation provided by the applicant.

**A. GENERAL INFORMATION AND MAPS**

**Unless otherwise specified, the Applicant must provide the following materials for any proposed amendment that will affect the development potential of properties. If large maps are submitted, the Applicant may be required to provide 8.5" x 11" maps for inclusion in public hearing packets.**

1. Wording of any proposed text changes.
2. A map showing the boundaries of the subject property, surrounding street network, and Future Land Use designations of surrounding properties.
3. A map showing existing land uses (not designations) of the subject property and surrounding properties.
4. Written descriptions of the existing land uses and how the proposed Future Land Use designation is consistent with current uses and current Future Land Use designations.
5. Map showing existing zoning of the subject property and surrounding properties.
6. Certified property boundary survey; date of survey; surveyor's name, address and phone number; and legal description(s) for the property subject to the requested change.

7. A copy of the deed(s) for the property subject to the requested change.
8. An aerial map showing the subject property and surrounding properties.
9. If applicant is not the owner, a notarized letter from the owner of the property authorizing the applicant to represent the owner.

**B. PUBLIC FACILITIES IMPACTS**

**Note:** The applicant must calculate public facilities impacts based on a maximum development scenario.

1. Traffic Analysis
  - a. For Small Scale Amendments (SSA)
    - (1) The Applicant shall estimate of traffic volumes associated with the proposed change using the most recent edition of Trip Generation prepared by the Institute of Traffic Engineers and assuming maximum development potential of the property.
    - (2) If the proposed Future Land Use change will result in an increase of 100 or more peak hour vehicle trip ends in excess of that which would result under the current Future Land Use designation, the Applicant shall attach a Traffic Impact Study prepared by a professional transportation planner or transportation engineer
  - b. For Large Scale Amendments (LSA)

All LSAs shall be accompanied by a Traffic Impact Study prepared by a professional transportation planner or transportation engineer.
  - c. Traffic Impact Studies are intended to determine the effect of the proposed land use change on the city's roadway network and the city's ability to accommodate traffic associated with the proposed change over a ten-year planning period.
  - d. An inability to accommodate the necessary modifications within the financially feasible limits of the city's plan will be a basis for denial of the requested land use change;
2. Provide estimates of demand associated with maximum potential development of the subject property under the current and proposed Future Land Use designations for provision potable water, sanitary sewer, and recreation/open space as follows:
  - a. Potable Water and Sanitary Sewer demand based on:
    - (1) 114 gallons per person per day (gppd) for residential uses
    - (2) 0.15 gallons per day per square foot of floor area for nonresidential uses
  - b. Recreation, and Open Space demand for residential uses of 3 acres per thousand peak season population.

3. Provide a letter from the appropriate agency substantiating the adequacy of the existing and proposed facilities, to support development resulting from the proposed change, including:
  - a. Solid Waste;
  - b. Water and Sewer;
  - c. Schools.

In reference to above, the applicant should supply the responding agency with the information from Section's II and III for their evaluation, as well as estimates of maximum population and nonresidential square footage developable under the existing and proposed Future Land Use categories. The application should include the applicant's correspondence to the responding agency.

**C. ENVIRONMENTAL IMPACTS**

Proposed plan amendments shall be accompanied by evidence that the following studies either have been completed for another permitting agency or are not relevant to the property. There shall be inventories of:

1. Wetlands and aquifer recharge areas.
2. Soils posing severe limitations to development.
3. Unique habitat.
4. Endangered species of wildlife and plants.
5. Floodprone areas.

**D. INTERNAL CONSISTENCY WITH THE CITY OF OKEECHOBEE COMPREHENSIVE PLAN**

1. Discuss how the proposal affects established City of Okeechobee population projections.
2. List all goals and objectives of the Bonita Springs Comprehensive Plan that are affected by the proposed amendment. This analysis should include an evaluation of all relevant policies under each goal and objective.
3. Describe how the proposal affects the County's Comprehensive Plan as it relates to adjacent unincorporated areas.
4. List State Policy Plan and Regional Policy Plan goals and policies that are relevant to this plan amendment.

**E. JUSTIFICATION OF PROPOSED AMENDMENT**

Justify the proposed amendment based upon sound planning principles. Be sure to support all conclusions made in this justification with adequate data and analysis.

**V. FEE SCHEDULE**

Large Scale Amendment (LSA)	\$4,000.00 plus \$30.00 per acre
Small Scale Amendment (SSA)	\$850.00 plus \$30.00 per acre
Text Amendment Flat Fee	\$2,000.00 each

**VI. AFFIDAVIT**

I, \_\_\_\_\_, certify that I am the owner or authorized representative of the property described herein, and that all answers to the questions in this application and any sketches, data, or other supplementary matter attached to and made a part of this application, are honest and true to the best of my knowledge and belief. I also authorize the staff of the City of Okeechobee to enter upon the property during normal working hours for the purpose of investigating and evaluating the request made through this application.

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed or Printed Name

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who  
(Name of Person)  
is personally known to me or produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public Signature- State of Florida

\_\_\_\_\_  
Commissioned Notary Name