



FLEXIBILITY REVIEW APPLICATION

DEPARTMENT OF URBAN PLANNING AND REDEVELOPMENT

PLANNING SERVICES DIVISION
115 SOUTH ANDREWS AVENUE, ROOM 329K
FORT LAUDERDALE, FLORIDA 33301
PHONE: (954) 357-6634 FAX: (954) 357-8655

Pursuant to Broward County Land Use Plan Policy 13.01.10, the Board of County Commissioners is required to make a determination that the allocation of flexibility is compatible with adjacent land uses and that impacts on public school facilities have been adequately considered prior to approving the allocation of flexibility

INSTRUCTIONS FOR FILING

Complete the application and submit it to the Planning Services Division along with the following:

- A current survey, site plan, location map, and legal description indicating gross and net acreage.
- All applicable fees. As of October 1, 2005, the fee for each Flexibility Review is \$1,700. Checks are payable to the Broward County Board of Commissioners and must be drawn from a bank within Florida.
- A copy of the local government's official action allocating flexibility to the site.

All information and case files concerning this application shall be matters of public records and available for inspection at the offices of the Planning Services Division upon request.

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115 SOUTH ANDREWS AVENUE, ROOM 329K
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PHONE: (954) 357-6612 FAX: (954) 357-8655

Please type or print the following information.

Date of Application: _____

Petitioner: _____ Phone: _____ Fax: _____

Petitioner's Address: _____

Owner (if different from above): _____

Owner's Address: _____

Agent: Name _____ Phone: _____ Fax: _____

Agent's Address: _____

General Location of Property: _____

Property Legal Description and Folio Numbers: _____

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In which jurisdiction is this flexibility being applied?

Contact person at that jurisdiction?

Name: _____ Phone: _____

What is the type of Flexibility that you are applying for? (Please check one)

- 5% Residential to Commercial
- 20% Industrial to Commercial
- 20% Commercial to Residential
- Employment Center to Commercial
- Residential Flexibility Units
- Reserve Units

What is the number of flex/reserve units or flex acreage that will be utilized with this project?

This Flexibility Review Application is being filed in conjunction with: (Please check one)

- Rezoning Application
- Plat Application
- Delegation Request (Plat Note Amendment)
- Local Land Use Plan Amendment
- Site Plan Application
- Conditional Use/Special Permit Application
- Other _____

Please note the case number (if any) to the above referenced application: _____

When is the above referenced application expected to be approved / adopted? _____

Current /Proposed (if any) Local Land Use Plan Designation: _____ / _____

Current/Proposed (if any) Broward County Land Use Plan Designation: _____ / _____

Current Zoning Designation: _____

Proposed (if any) Zoning Designation: _____

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This is to certify that I am the owner of the property described in this application.

Owner's Signature: _____

Mailing Address: _____

Date: _____

This is to certify that I am the Petitioner for this request, and that I am acting with the authorization of the property owner.

Petitioner's Signature: _____

Mailing Address: _____

Date: _____

This is to certify that I am the agent for the petitioner/owner of the property described in this application, and I am authorized to act in such capacity.

Agent's Signature: _____

Mailing Address: _____

Date: _____

For Office Use Only

Accepted By: _____ Date: _____ Fee: _____

File Number: _____ Flex Zone: _____

Attachments: _____