Resilient Environment Department
URBAN PLANNING DIVISION
1 N. University Drive, Box 102 · Plantation, FL 33324 · T: 954-357-6666 F: 954-357-6521 · Broward.org/Planning

Application Number _____

Development and Environmental Review Online Application

Project Information

Plat/Site Plan Name			
Plat/Site Number	Plat Book - Page (if recorded)		
Owner/Applicant/Petitioner Name			
Address	City	State	Zip
Phone	Email		
Agent for Owner/Applicant/Petitioner	Contact Person		
Address	City	State	Zip
Phone	Email		
Folio(s)			
Location			

_____ side of _____ at/between/and _____ and/of _____
north side/corner north ***street name*** ***street name / side/corner*** ***street name***

Type of Application (this form required for all applications)

Please check all that apply (use attached **Instructions** for this form).

- ☐ **Plat** (fill out/PRINT ***Questionnaire Form***, ***Plat Checklist***)
- ☐ **Site Plan** (fill out/PRINT ***Questionnaire Form***, ***Site Plan Checklist***)
- ☐ **Note Amendment** (fill out/PRINT ***Questionnaire Form***, ***Note Amendment Checklist***)
- ☐ **Vacation** (fill out/PRINT ***Vacation Continuation Form***, ***Vacation Checklist***, use ***Vacation Instructions***)
  - ☐ **Vacating Plats, or any Portion Thereof** (BCCO 5-205)
  - ☐ **Abandoning Streets, Alleyways, Roads or Other Places Used for Travel** (BCAC 27.29)
  - ☐ **Releasing Public Easements and Private Platted Easements or Interests** (BCAC 27.30)
- ☐ **Vacation** (***Notary Continuation Form*** Affidavit required, fill out Business Notary if needed)

Application Status

Has this project been previously submitted?	☐ **Yes**	☐ **No**	☐ **Don't Know**
This is a resubmittal of:	☐ **Entire Project**	☐ **Portion of Project**	☐ **N/A**
What was the project number assigned by the Urban Planning Division?	Project Number	☐ **N/A**	☐ **Don't Know**
Project Name		☐ **N/A**	☐ **Don't Know**
Are the boundaries of the project exactly the same as the previously submitted project?	☐ **Yes**	☐ **No**	☐ **Don't Know**
Has the flexibility been allocated or is flexibility proposed to be allocated under the County Land Use Plan?	☐ **Yes**	☐ **No**	☐ **Don't Know**

If yes, consult Policy 13.01.10 of the Land Use Plan. A compatibility determination may be required.

Replat Status

Is this plat a replat of a plat approved and/or recorded after March 20, 1979?	☐ **Yes**	☐ **No**	☐ **Don't Know**

If YES, please answer the following questions.

Project Name of underlying approved and/or recorded plat	Project Number

Is the underlying plat all or partially residential?	☐ **Yes**	☐ **No**	☐ **Don't Know**

If YES, please answer the following questions.

Number and type of units approved in the underlying plat.
Number and type of units proposed to be deleted by this replat.
Difference between the total number of units being deleted from the underlying plat and the number of units proposed in this replat.

School Concurrency (Residential Plats, Replats and Site Plan Submissions)

Does this application contain any residential units? (If "No," skip the remaining questions.)	☐ **Yes**	☐ **No**
If the application is a replat, is the type, number, or bedroom restriction of the residential units changing?	☐ **Yes**	☐ **No**
If the application is a replat, are there any new or additional residential units being added to the replat's note restriction?	☐ **Yes**	☐ **No**
Is this application subject to an approved Declaration of Restrictive Covenants or Tri-Party Agreement entered into with the Broward County School Board?	☐ **Yes**	☐ **No**

If the answer is "Yes" to any of the questions above

RESIDENTIAL APPLICATIONS ONLY: Provide a receipt from the School Board documenting that a Public School Impact Application (PSIA) and fee have been accepted by the School Board for residential projects subject to school concurrency, exempt from school concurrency (exemptions include projects that generate less than one student, age restricted communities, and projects contained within Developments of Regional Impact), or subject to an approved Declaration of Restrictive Covenant or Tri-Party Agreement.

Land Use and Zoning

EXISTING	PROPOSED
Land Use Plan Designation(s)	Land Use Plan Designation(s)
Zoning District(s)	Zoning District(s)

Existing Land Use

A credit against impact fees may be given for the site's current or previous use. **No credit will be granted for any demolition occurring more than three (3) years of Environmental Review of construction plans.** To receive a credit, complete the following table. **Note:** If buildings have been demolished, which are not shown on the survey required with this application, attach an additional "as built" survey dated within three (3) years of this application. Other evidence may be accepted if it clearly documents the use, gross square footage and/or number and type of dwelling units, and date of demolition.

Are there any existing structures on the site? ☐ **Yes** ☐ **No**

Land Use	Gross Building sq. ft.* or Dwelling Units	Date Last Occupied	EXISTING STUCTURE(S)		
			Remain the Same?	Change Use?	**Has** been or **will** be Demolished?
			YES | NO	YES | NO	HAS | WILL | NO
			YES | NO	YES | NO	HAS | WILL | NO
			YES | NO	YES | NO	HAS | WILL | NO

***Gross non-residential square footage includes permanent canopies and overhangs for gas stations, drive-thru facilities, and overhangs designed for outdoor tables at a restaurant. A building id defined by the definition in the Land Development Code.**

Proposed Use

RESIDENTIAL USES		NON-RESIDENTIAL USES	
Land Use	**Number of Units/Rooms**	**Land Use**	**Net Acreage or Gross Floor Area**

NOTARY PUBLIC: Owner/Agent Certification

This is to certify that I am the owner/agent of the property described in this application and that all information supplied herein is true and correct to the best of my knowledge. By signing this application, owner/agent specifically agrees to allow access to described property at reasonable times by County personnel for the purpose of verification of information provided by owner/agent.

_____ _____

Owner/Agent Signature **Date**

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of ☐ physical presence | ☐ online notarization, this _____day of _____, 20_____, who ☐ is personally known to me | ☐ has produced _____ as identification.

_____ _____

Name of Notary Typed, Printed or Stamped **Signature of Notary Public – State of Florida**

_____ _____

Notary Seal (or Title or Rank) **Serial Number (if applicable)**

For Office Use Only

Application Type		
Application Date	Acceptance Date	Fee
Comments Due	Report Due	CC Meeting Date
Adjacent City or Cities		

☐ **Plats** ☐ **Surveys** ☐ **Site Plans** ☐ **Landscaping Plans** ☐ **Lighting Plans**
☐ **City Letter** ☐ **Agreements**

☐ **Other:**

Distribute To
☐ **Full Review** ☐ **Planning Council** ☐ **School Board** ☐ **Land Use & Permitting**
☐ **Health Department** ☐ **Zoning Code Services (BMSD only)** ☐ **Administrative Review**

☐ **Other:**

Received By