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VARIANCE PETITION APPLICATION

Variance from Setbacks Required for a Particular Zoning District

LDC section 9.04.00 & Code of Laws section 2-83 – 2-90

Chapter 3 J. of the Administrative Code

	APPLICANT CONTACT INFOR	RMATION	
Name of Property Owne	er(s):		
Name of Applicant if dif	ferent than owner:		
Address:	City:	State:	ZIP:
Геlephone:	Cell:	Fax:	
-Mail Address:			
lame of Agent:			
Firm:			
Address:	City:	State:	ZIP: _
Геlephone:	Cell:	Fax:	
-Mail Address:			

BE AWARE THAT COLLIER COUNTY HAS LOBBYIST REGULATIONS. GUIDE YOURSELF ACCORDINGLY AND ENSURE THAT YOU ARE IN COMPLIANCE WITH THESE REGULATIONS.

PROPERTY INFORMATION Provide a detailed legal description of the property covered by the application: (If space is inadequate, attach on separate page) Property I.D. Number: _______Section/Township/Range: _____/____/ Subdivision: _____Unit: ____Lot: ___Block: ____ Metes & Bounds Description: ______Total Acreage: _____ Address/ General Location of Subject Property: ADJACENT ZONING AND LAND USE Zoning Land Use S Ε Minimum Yard Requirements for Subject Property: Yes Front:_____ f.t. **Corner Lot:** No Side:_____ f.t. Waterfront Lot: Yes No

Chapter 8 of the Administrative Code requires that the applicant must remove their public hearing advertising sign(s) after final action is taken by the Board of County Commissioners. Based on the Board's final action on this item, please remove all public hearing advertising sign(s) immediately.

Rear:_____ f.t.

ASSOCIATIONS

Complete the following for all registered Association(s) that could be affected by this petition. Provide additional sheets if necessary. Information can be found on the Board of County Commissioner's website at http://www.colliergov.net/Index.aspx?page=774.

Name of Homeowner Association:				
Mailing Address:	City:	State:	ZIP:	
Name of Homeowner Association:				
Mailing Address:	City:	State:	ZIP:	
Name of Homeowner Association:				
Mailing Address:	City:	State:	ZIP:	
Name of Homeowner Association:				
Mailing Address:	City:	State:	ZIP:	
Name of Homeowner Association:				
Mailing Address:	City:	State:	ZIP:	

NATURE OF PETITION

On a separate sheet, attached to the application, please provide the following:

- 1. A detailed explanation of the request including what structures are existing and what is proposed; the amount of encroachment proposed using numbers, i.e. reduce front setback from 25 ft. to 18 ft.; when property owner purchased property; when existing principal structure was built (include building permit number(s) if possible); why encroachment is necessary; how existing encroachment came to be; etc.
- 2. For projects authorized under LDC Section 9.04.02, provide a detailed description of site alterations, including any dredging and filling.
- 3. Pursuant to LDC section 9.04.00, staff shall be guided in their recommendation to the Hearing Examiner, and the Hearing Examiner shall be guided in the determination to approve or deny a variance petition by the criteria (a-h) listed below. Please address the following criteria:
 - a) Are there special conditions and circumstances existing which are peculiar to the location, size and characteristics of the land, structure, or building involved.

- b) Are there special conditions and circumstances which do not result from the action of the applicant such as pre-existing conditions relative to the property which is the subject of the variance request.
- c) Will a literal interpretation of the provisions of this zoning code work unnecessary and undue hardship on the applicant or create practical difficulties on the applicant.
- d) Will the variance, if granted, be the minimum variance that will make possible the reasonable use of the land, building or structure and which promote standards of health, safety or welfare.
- e) Will granting the variance requested confer on the petitioner any special privilege that is denied by these zoning regulations to other lands, buildings, or structures in the same zoning district.
- f) Will granting the variance be in harmony with the intent and purpose of this zoning code, and not be injurious to the neighborhood, or otherwise detrimental to the public welfare.
- g) Are there natural conditions or physically induced conditions that ameliorate the goals and objectives of the regulation such as natural preserves, lakes, golf course, etc.
- h) Will granting the variance be consistent with the Growth Management Plan?

4.	Official Interpretations or Zoning Verifications: To your knowledge, has there been a official interpretation or zoning verification rendered on this property within the last year?
	☐ Yes ☐ No
	If yes, please provide copies.

Pre-Application Meeting and Final Submittal Requirement Checklist for: Variance Chapter 3 J. of the Administrative Code

The following Submittal Requirement Checklist is to be utilized during the Pre-Application Meeting and at time of application submittal. At time of submittal, the checklist is to be completed and submitted with the application packet. Please provide the submittal items in the exact order listed below with cover sheets attached to each section. **Incomplete submittals will not be accepted.**

REQUIREMENTS FOR REVIEW	REQUIRED	NOT REQUIRED
Completed Application (download current form from County website)	\boxtimes	
Pre-Application Meeting Notes	\boxtimes	
Project Narrative	\boxtimes	
Completed Addressing Checklist	\boxtimes	
Property Ownership Disclosure Form	\boxtimes	
Conceptual Site Plan 24" x 36" and one 8 ½ " x 11" copy		
Survey of property showing the encroachment (measured in feet)	\times	
Affidavit of Authorization, signed and notarized	\boxtimes	
Deeds/Legal(s)		
Location map		
Current aerial photographs (available from Property Appraiser) with project boundary and, if vegetated, FLUCFCS Codes with legend included on aerial		
Historical Survey or waiver request, if applicable		
Environmental Data Requirements or exemption justification		
Once the first set of review comments are posted, provide the assigned planner with draft Agent Letter and address of property owners		
Electronic copy of all documents and plans *Please advise: The Office of the Hearing Examiner requires all materials to be submitted electronically in PDF format.		

ADDITIONAL REQUIREMENTS FOR THE PUBLIC HEARING PROCESS:

- Following the completion of the review process by County review staff, the applicant shall submit all materials electronically to the designated project manager.
- Please contact the project manager to confirm the number of additional copies required.

Planners: Indicate if the petition needs to be routed to the following reviewers:				
	Bayshore/Gateway Triangle Rec Executive Director	development:		Historical Review:
	City of Naples: Robin Singer, Pla	nning Director		Immokalee Water/Sewer District:
	Conservancy of SWFL: Nichole	Johnson		Parks and Recreation Director: Olema Edwards
	Emergency Management: Dan EMS: Artie Bay	Summers; and/or		School District (Residential Components): Amy Lockheart
	Other:			
			•	
		FEE REQUII	REME	NTS
Pre-Application Meeting: \$500.00				
Applic	ant Signature			Date
Printe	d Name			