REZONING APPLICATION

A completed application for *Timing & Phasing, Substandard Road Review (LDC 901.2), and Waiver Request must be submitted to the Planning & Development Transportation Planner and evaluated **prior** to any rezoning application submittal to the Zoning/Code Compliance Department.

No rezoning application will be accepted without a written, County-approved Timing & Phasing and/or Substandard Road Analysis or written, County-approved exemption letter.

The written, County-approved analysis or exemption letter from the Current Planning Department Transportation Planner **must** be attached and submitted with your rezoning application.

Please call the Zoning & Intake Department to schedule a content meeting for submittal at 727-847-8142.

If you have any questions or need further assistance, please contact the Zoning & Intake Department at (727) 847-8142, New Port Richey; (352) 521-4279, Ext. 4701, Dade City; or (813) 929-1350, Land O' Lakes.

*A Timing & Phasing application for an MPUD Master Planned Unit Development and other rezoning types can be obtained from the Pasco County website at www.pascocountyfl.net.

REQUIREMENTS FOR PUBLIC NOTICE SHALL APPLY TO ALL REZONINGS,CONDITIONAL USES, & SPECIAL EXCEPTIONS.

The applicant/representative is responsible to provide public notice for all rezoning, conditional use, and special exception applications. Public notice consists of a written notice letter sent via United States Post Office to all property owners within 500-feet* of the subject property and posting a Public Notice/Public Hearing sign on the subject property at least 14 days prior to the hearing(s); and, providing a notarized affidavit attesting to providing public notice at least 10 days prior to the public hearing(s). Depending on the type and scope of the application, a Neighborhood Meeting may be required. After submitting your application, Pasco County will provide additional instructions, sample forms for written notice and affidavit, and a mailing list of property owners within 500-feet of the subject property. Specialized public notice sign is available from Planning and Development Department for a nominal fee. Pasco County will publish a public notice in a newspaper of general circulation at least 14 days prior to the hearing(s).

*SOME AREAS MAY REQUIRE 1000 FEET TO BE DETERMINED BY STAFF.

■ **I prefer to receive correspondence pertaining to the application via EMAIL ADDRESS:**

Clarke.Hobby@hobbylaw.net; Kayla.Witkowski@clearviewland.com

APPLICATION FOR ZONING AMENDMENT
PASCO COUNTY, FLORIDA
APPLICATION NO. _____

The undersigned owner(s) of the following legally described property has formally requested consideration of a zoning amendment in accordance with provisions of Florida Statutes and Section 402.1.B of the Pasco County Land Development Code.

It shall be the responsibility of the petitioner, or her/his legal agent of record, to provide all information required below or any other information which is reasonable and relevant to the formulation of a recommendation to the zoning amendment being considered. **No application for review shall be deemed complete until all required information is provided**.

1. Name of Current Owner(s): Mitras Family Extended LLC

2. Owner's Mailing Address: 11150 Linden Depot Road

City San Antonio State FL Zip Code 33576

3. Owner's Telephone Number: _____

4. Parcel ID No.: 05-25-18-0000-00100-0000

5. Present Zoning District: AR Proposed Zoning District: R-4

6. Existing Use: Agricultural

7. **Proposed Use/Development**: (provide a narrative)

8. **A.** **Two signed and sealed boundary legal descriptions and sketches or property survey (by a registered surveyor), including wetland (if any) delineation, to be supplied at time of application.**

B. **A Timing & Phasing application must be submitted to the Planning & Development Department prior to submission of this application. No application will be accepted without a written County-approved analysis study or County-approved exemption (see cover sheet). A County-approved methodology statement for MPUD applications only will be accepted.** Copy of Warranty Deed X

9. Last Year's PAID Tax Bill X **9a**. Notarized Agent of Record (if applicable) X

10. All **MPUDs must** be submitted at an **application submittal meeting** with a planner.

11. Site Plan for MPUD Amendments (5 full size plus two 8½" X 14" copies of plan), CD and Narrative _

12. Is this application the result of a Notice of Violation? _____ If so, please attach a copy.
All submittals provide a copy of the pre-application meeting notes or waiver.

13. **Fees**: Please make checks payable to Pasco County Board of County Commissioners.

	Euclidian Rezoning		MPUD	
#107	Base Fee	**$850.00**	Base Fee	**$8,000.00**
	Per Acre or partial acre	**$ 20.00**	Per Acre	**$20.00**
#269	Technology Fee	**$ 25.00**	**(Maximum Fee $25,000)**	
#154	Environmental Review Fee	**$125.00**	Technology Fee	**$25.00**
#	Advertising Fee	**$ 60.00**	Environmental Review Fee	**$1000.00**
#215	**Public Hearing Sign**	**$ 12.75**	**plus $1/acre (Max total $1,750.00)**	
#215	**Public Hearing Stakes**	**$ 1.36**	**MPUD Substantial Modification**:	
#109	**Timing & Phasing Application**	**$525.00**	Base Fee	**$6,000.00**
			Per Acre	**$20.00**
			(Maximum Fee $25,000)	
			Technology Fee	**$25.00**
	Per LDC 803.2.A- all applications for property 10 acres or larger will require a preliminary habitat assessment & may also require a species specific survey in accordance with applicable State & Federal guidelines, technical reports & reommendations.		Environmental Review Fee	**$1000.00**
			plus $1/acre (Max total $1,750.00)	
			MPUD Non-substantial Modification:	
			Base Fee	**$3,000.00**
			Technology Fee	**$25.00**
			Environmental Review Fee	**$750.00**

The petitioner acknowledges that all zoning amendments are subject to all other applicable sections of the Pasco County Land Dev. Code
**** A CONTINUANCE MAYBE GRANTED IF THE REQUEST IS RECEIVED, IN WRITING, BY THIS OFFICE WITH CAUSE SHOWN A MINIMUM OF FIVE (5) DAYS BEFORE ANY MEETING.** A $300.00 CONTINUANCE FEE MAY APPLY.**

Date: _____

Kayla Witkowski
Owner's/Representative's Signature

Kayla Witkowski, AICP
Owner's/Representative's Name (Print)

3010 W Azeele St
Representative's Address

Tampa, FL 33609
Representative's City, State, Zip Code

813-223-3919
Representative's Telephone Number

Fee Calculation: Check Number:_____

Accepted By:

Kayla.Witkowski@clearviewland.com
Applicant E-Mail Address:

****ANY PROPOSED CHANGES TO CONDITIONS OF REZONING MUST BE IN WRITING AND DISTRIBUTED TO STAFF AT LEAST THREE (3) BUSINESS DAYS PRIOR TO THE MEETING. FAILURE TO DO SO WILL RESULT IN A CONTINUANCE.**