List of Required Submittals

Only complete applications will be accepted:

- Developer Application for Workforce Housing Units submitted to the Housing & Community Development Department (HCD)
- Completed Workforce Housing Density Bonus application form (Page 2)
- Pre-Application Meeting Notes
- Application fee payment (Additional Fees required if variances are requested)
- Affidavit to Authorize Agent, if Agent signs application
- Data Sheet
- Certificate of Concurrency
- Public Participation Report
- Site plan and survey of the subject property:
  - Two (2) copies (please fold to 8 ½ x 11”) & one reduced site plan 8 ½ x 11” to scale: black and white & color
  - Drawn to scale (engineers scale no smaller than 1" = 50’); North arrow
  - Phasing schedule, if applicable
  - Dimensions and exact locations of:
    - property lines, structures, internal walkways, pedestrian connections
    - vehicle use areas (driveways, parking spaces, curbing, wheel stops, ingress/egress, etc.)
    - utilities (overhead power lines, exterior lighting, easements, etc.)
    - buffer walls, fences with elevation and height and material indicated
    - solid waste disposal method and location
    - storm water retention, preservation areas
    - any other architectural or engineering features
- Landscape plans: Two (2) copies (please fold to 8 ½ x 11”)
  - One reduced site plan 8 ½ x 11” to scale (black and white) & (color)
  - Legend identifying plants by scientific and common name, size, spacing & quantity
  - Location, type and size in diameter at breast height (d.b.h.) of all specimen trees indicated to be preserved or removed
- Elevation drawings: 8 ½ x 11” to scale (color), Depicts all sides of existing & proposed structure(s)
- PDF of application documents (may be emailed to Staff Planner)
- Project Narrative
- Projects within the DC zoning district(s)

A Pre-Application Meeting is Required Prior to Submittal.
To schedule, please call (727) 892-5498.

Completeness review by city staff: ____________
All applications are to be filled out completely and correctly. The application shall be submitted to the Development Review Services Division, located on the 1st floor of the Municipal Services Building, One Fourth Street North.

<table>
<thead>
<tr>
<th>GENERAL INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NAME of APPLICANT (Property Owner):</strong></td>
</tr>
<tr>
<td>Street Address:</td>
</tr>
<tr>
<td>City, State, Zip:</td>
</tr>
<tr>
<td>Telephone No: Email:</td>
</tr>
<tr>
<td><strong>NAME of AGENT OR REPRESENTATIVE:</strong></td>
</tr>
<tr>
<td>Street Address:</td>
</tr>
<tr>
<td>City, State, Zip:</td>
</tr>
<tr>
<td>Telephone No: Email:</td>
</tr>
<tr>
<td><strong>NAME of ARCHITECT or ENGINEER:</strong></td>
</tr>
<tr>
<td>Company Name: Contact Name:</td>
</tr>
<tr>
<td>Telephone No: Website:</td>
</tr>
<tr>
<td><strong>PROPERTY INFORMATION:</strong></td>
</tr>
<tr>
<td>Address/Location: Email:</td>
</tr>
<tr>
<td>Parcel ID#(s):</td>
</tr>
<tr>
<td><strong>DESCRIPTION OF REQUEST:</strong></td>
</tr>
<tr>
<td><strong>PRE-APP MEETING DATE:</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>SPECIAL EXCEPTION (SE)</strong></th>
<th><strong>SITE PLAN REVIEW (SPR)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Exception (SE), General Application:</td>
<td>$1,000.00</td>
</tr>
<tr>
<td>Special Exception (SE), Modification:</td>
<td>$ 500.00</td>
</tr>
<tr>
<td>Concurrency</td>
<td>$ 25.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>VARIANCES</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Variance – First Variance</td>
</tr>
<tr>
<td>Variance – Each Additional</td>
</tr>
</tbody>
</table>

Cash, credit, and checks made payable to the “City of St. Petersburg”

**AUTHORIZATION**

City staff and the designated Commission may visit the subject property during review of the requested variance. Any Code violations on the property that are noted during the inspections will be referred to the City’s Codes Compliance Assistance Department. The applicant, by filing this application, agrees he or she will comply with the decision(s) regarding this application and conform to all conditions of approval. The applicant’s signature affirms that all information contained within this application has been completed and that the applicant understands that processing this application may involve substantial time and expense. Filing an application does not guarantee approval, and denial or withdrawal of an application does not result in remittance of the application fee.

**NOTE:** IT IS INCUMBENT UPON THE APPLICANT TO SUBMIT CORRECT INFORMATION. ANY MISLEADING, DECEPTIVE, INCOMPLETE OR INCORRECT INFORMATION MAY INVALIDATE YOUR APPROVAL.

Signature of Owner/Agent*: ____________________________________________

*Affidavit to Authorize Agent required, if signed by Agent.

City of St. Petersburg – One 4th Street North – PO Box 2842 – St. Petersburg, FL 33731-2842 – (727) 893-7471

www.stpete.org/ldr
AFFIDAVIT TO AUTHORIZE AGENT

I am (we are) the owner(s) and record title holder(s) of the property noted herein

Property Owner’s Name:


"This property constitutes the property for which the following request is made

Property Address: ________________________________________________________________

Parcel ID#: ________________________________________________________________

Request:

"The undersigned has(have) appointed and does(do) appoint the following agent(s) to execute any application(s) or other documentation necessary to effectuate such application(s)

Agent’s Name(s): ________________________________________________________________

This affidavit has been executed to induce the City of St. Petersburg, Florida, to consider and act on the above described property

I(we), the undersigned authority, hereby certify that the foregoing is true and correct

Signature (owner): ____________________________________________ Printed Name

Sworn to and subscribed on this date

Identification or personally known: ___________________________________________________

Notary Signature: ____________________________________________ Date: __________________________

Commission Expiration (Stamp or date): __________________________
**DATA SHEET**

**Workforce Housing Density/Intensity Bonus/Exemption**

**ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED. FAILURE TO COMPLETE THIS FORM WILL RESULT IN DEFERRAL OF YOUR APPLICATION.**

## DATA TABLE

1. **Zoning Classification:**
   - [ ]

2. **Existing Land Use Type(s):**
   - [ ]

3. **Proposed Land Use Type(s):**
   - [ ]

4. **Area of Subject Property:**
   - [ ]

5. **Bonus Units/FAR or Exemption Requested:**
   - [ ]

6. **Gross Floor Area** (total square feet of building(s))
   - **Existing:** [ ] Sq. ft.
   - **Proposed:** [ ] Sq. ft.
   - **Permitted:** [ ] Sq. ft.

7. **Floor Area Ratio** (total square feet of building(s) divided by the total square feet of entire site)
   - **Existing:** [ ] Sq. ft.
   - **Proposed:** [ ] Sq. ft.
   - **Permitted:** [ ] Sq. ft.

8. **Building Coverage** (first floor square footage of building)
   - **Existing:** [ ] Sq. ft. [ ]% of site
   - **Proposed:** [ ] Sq. ft. [ ]% of site
   - **Permitted:** [ ] Sq. ft. [ ]% of site

9. **Open Green Space** (include all green space on site; do not include any paved areas)
   - **Existing:** [ ] Sq. ft. [ ]% of site
   - **Proposed:** [ ] Sq. ft. [ ]% of site

10. **Interior Green Space of Vehicle Use Area** (include all green space within the parking lot and drive lanes)
    - **Existing:** [ ] Sq. ft. [ ]% of vehicular area
    - **Proposed:** [ ] Sq. ft. [ ]% of vehicular area

11. **Paving Coverage** (including sidewalks within boundary of the subject property; do not include building footprint(s))
    - **Existing:** [ ] Sq. ft. [ ]% of site
    - **Proposed:** [ ] Sq. ft. [ ]% of site
12. **Impervious Surface Coverage** (total square feet of all paving, building footprint and other hard surfaced areas)

<table>
<thead>
<tr>
<th></th>
<th>Existing: Sq. ft.</th>
<th>% of site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permitted:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. **Density** (units per "x")

<table>
<thead>
<tr>
<th>Sq. Ft. or Acre(s)</th>
<th>No. of Employees</th>
<th>No. of Clients (C.R. / Home)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Existing:</td>
<td>Existing:</td>
<td>Existing:</td>
</tr>
<tr>
<td>Proposed:</td>
<td>Proposed:</td>
<td>Proposed:</td>
</tr>
<tr>
<td>Permitted:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14 a. **Parking (Vehicle) Spaces**

<table>
<thead>
<tr>
<th></th>
<th>includes</th>
<th>disabled parking spaces</th>
</tr>
</thead>
<tbody>
<tr>
<td>Existing:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proposed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permitted:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14 b. **Parking (Bicycle) Spaces**

<table>
<thead>
<tr>
<th></th>
<th>Spaces</th>
<th>% of vehicular parking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Existing:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proposed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permitted:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

15. **Building Height**

<table>
<thead>
<tr>
<th></th>
<th>Feet</th>
<th>Stories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Existing:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proposed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permitted:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16. **Construction Value**

What is the estimate of the total value of the project upon completion? $ 

---

Note: See Drainage Ordinance for a definition of "alteration." If yes, please be aware that this triggers Drainage Ordinance compliance. Please submit drainage calculations to the Engineering Department for review at your earliest convenience. The DRC must approve all Drainage Ordinance variances.

Updated 03-22-18
In accordance with LDR Section 16.70.040.1.F.2. “It is the policy of the City to encourage applicants to meet with residents of the surrounding neighborhoods prior to filing an application for a permit requiring review and public hearing. The applicant, at his option, may elect to include neighborhood mediation as a preparatory step in the development process. Participation in the public participation process prior to required public hearings will be considered by the decision-making official when considering the need, or request, for a continuance of an application. It is not the intent of this section to require neighborhood meetings, but to encourage meetings prior to the submission of applications for approval and documentation of efforts which have been made to address any potential concerns prior to the formal application process.”

<table>
<thead>
<tr>
<th>APPLICANT REPORT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Street Address:</strong></td>
</tr>
<tr>
<td>1. Details of techniques the applicant used to involve the public</td>
</tr>
<tr>
<td>(a) Dates and locations of all meetings where citizens were invited to discuss the applicant's proposal</td>
</tr>
<tr>
<td>(b) Content, dates mailed, and number of mailings, including letters, meeting notices, newsletters, and other publications</td>
</tr>
<tr>
<td>(c) Where residents, property owners, and interested parties receiving notices, newsletters, or other written materials are located</td>
</tr>
<tr>
<td>2. Summary of concerns, issues, and problems expressed during the process</td>
</tr>
<tr>
<td>3. Signature or affidavit of compliance - President or Vice-President of any neighborhood associations</td>
</tr>
<tr>
<td>Check one: ( ) Proposal supported</td>
</tr>
<tr>
<td>( ) Do not support the Proposal</td>
</tr>
<tr>
<td>( ) Unable to comment on the Proposal at this time</td>
</tr>
<tr>
<td>( ) Other comment(s):</td>
</tr>
<tr>
<td>Association Name: ____________________ President or Vice-President Signature: ____________________</td>
</tr>
<tr>
<td>If the president or vice-president of the neighborhood association are unavailable or refuse to sign such certification, a statement as to the efforts to contact them and (in the event of unavailability or unwillingness to sign) why they were unable or unwilling to sign the certification.</td>
</tr>
</tbody>
</table>
City of St. Petersburg
Planning & Economic Development Department
Construction Services & Permitting
Certificate of Concurrency
Application

I. GENERAL INFORMATION (filled out by applicant)

Owner Name & Address

Representative Name & Address

Phone

Phone

Property Address and Legal Description

Is the subject property part of a previously approved site plan? _____ Yes _____ No
If yes, provide case number

Is the subject property part of an approved DRI? _____ Yes _____ No
If yes, provide DRI name

TYPE OF ACTIVITY:

RESIDENTIAL:
New Construction
Addition
Change of use
Other New – Number of Units/Beds

NON-RESIDENTIAL:
Existing Use
Existing Bldg. Area (sq. ft.)
Existing Use
Existing Bldg. Area (sq. ft.)

Proposed Use
Proposed Bldg. Area (sq. ft.)
Proposed Use
Proposed Bldg. Area (sq. ft.)

Applicant (owner of property) Signature

Date

If there are any questions regarding this application, please call the Concurrency Coordinator at 727-893-7883.

Please do not fill out the second portion of this form (opposite side).
II. SIMPLE CONCURRENcy DETERMINATION (filled out by Concurrency Coordinator)

A. Test Questions

1. Is the project located outside of Traffic Restriction and Concern Areas?  
   __Yes____  __No____

2. Is the project a single family home or a duplex?  
   __Yes____  __No____

3. Is the project located in the Transportation Concurrency Exception Area (TCEA) or an approved DRI?  
   __Yes____  __No____

B. If the answer to any of the above three questions is yes, the project is approved for concurrency.

C. If the answer to all of the above questions is no, refer application to the Transportation and Parking Management Department for complex concurrency determination.

D. If the project is located in the TCEA on a major street that is operating at a LOS that is lower than the City’s adopted standard and is projected to generate more than 50 new p.m. peak hour trips, the project shall require special exception approval.

Reviewer Signature of Approval ___________________________ Date _________________

III. COMPLEX CONCURRENcy DETERMINATION (filled out by Concurrency Coordinator)

Traffic Study Required _____Yes _____No  Public Utilities Review _____Yes _____No

Status of Facility/Service:

Traffic Acceptable ______________________  Recreation & Acceptable ____________
Circulation Traffic Concern ___________________ Open Space Unacceptable __________
              Traffic Restriction ___________________

Solid  Acceptable _______________  Drainage Dependent upon final
Waste Unacceptable ________________ site plan review

Mass  Acceptable ________________
Transit Unacceptable ________________

Water Acceptable ________________  Service Provider ___________________________
Supply Unacceptable ________________
Sanitary Acceptable ________________  Service Provider ___________________________
Supply Unacceptable ________________  Service Area __________________________

Finding: Approved ____________  Conditionally Approved ____________  Denied ____________

Comments: ____________________________________________

Reviewer Signature ___________________________ Date ________________ $ ____________  Amount Due
Applicants are strongly encouraged to obtain signatures in support of the proposal(s) from owners of property adjacent to or otherwise affected by a particular request.

<table>
<thead>
<tr>
<th>Street Address:</th>
<th>Case No.:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description of Request:</strong></td>
<td></td>
</tr>
</tbody>
</table>

The undersigned adjacent property owners understand the nature of the applicant’s request and do not object (attach additional sheets if necessary):

1. **Affected Property Address:**
   - Owner Name (print):
   - Owner Signature:

2. **Affected Property Address:**
   - Owner Name (print):
   - Owner Signature:

3. **Affected Property Address:**
   - Owner Name (print):
   - Owner Signature:

4. **Affected Property Address:**
   - Owner Name (print):
   - Owner Signature:

5. **Affected Property Address:**
   - Owner Name (print):
   - Owner Signature:

6. **Affected Property Address:**
   - Owner Name (print):
   - Owner Signature:

7. **Affected Property Address:**
   - Owner Name (print):
   - Owner Signature: