

Growth Management Community Development Department Need Help? <u>GMCD Public Portal</u> <u>Online Payment Guide</u> <u>E-Permitting Guides</u>

Application to Amend The Growth Management Plan

LDC subsection 10

Chapter 3 of the Administrative Code

The application is to be reviewed by staff for sufficiency within 30 calendar days following the filing deadline. The applicant will be notified, in writing, of the sufficiency determination. If insufficient, the applicant will have 30 days to remedy the deficiencies. For additional information on the processing of the application, see Resolution 12-234. If you have any questions, please contact the Comprehensive Planning Section at 239-252-2400.

APPLICANT CONTACT INFORMATION

Name of Applicant if dil	ferent than owner:			
Address:	City:	State:	ZIP:	
Telephone:	Cell:	Fax:	Fax:	
E-Mail Address:				
Name of Agent:				
Firm:				
	City:			
Telephone:	Cell:	Fax:		
E-Mail Address:				
Name of Owner(s) of R	ecords:			
Address:	City:	State:	ZIP:	
Telephone:	Cell:	Fax:		

*On an additional paper include the Name, Company, Address and Qualifications of all consultants and other professionals providing information contained in this application, as well as Qualifications of the Agent identified above

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Community Development Department

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DISCLOSURE OF INTEREST INFORMATION

A. If the property is owned fee simple by an INDIVIDUAL, Tenancy by the entirety, tenancy in common, or joint tenancy, list all parties with an ownership interest as well as the percentage of such interest. (Use additional sheets if necessary).

NAME:

PERCENTAGE OF OWNERSHIP:

B. If the property is owned by a CORPORATION, list the officers and stockholders and the percentage of stock owned by each.

NAME:

PERCENTAGE OF OWNERSHIP:

C. If the property is in the name of a TRUSTEE, list the beneficiaries of the trust with the percentage of interest.

NAME:

PERCENTAGE OF OWNERSHIP:

D. If the property is in the name of a GENERAL or LIMITED PARTNERSHIP, list the name of the general and/or limited partners.

NAME:

PERCENTAGE OF OWNERSHIP:



E. If there is a CONTRACT FOR PURCHASE, with an individual or individuals, a Corporation, Trustee, or a Partnership, list the names of the contract purchasers below, including the officers, stockholders, beneficiaries, or partners.

NAME:

PERCENTAGE OF OWNERSHIP:

DATE OF CONTRACT:

F. If any contingency clause or contract terms involve additional parties, list all individuals or officers, if a corporation, partnership, or trust.

NAME:

G. Date subject property acquired leased :_____Term of lease: _____yrs./mos.

If, Petitioner has option to buy, indicate date of option: ______ and date option terminates: ______, or anticipated closing: ______.

NOTE:

H. Should any changes of ownership or changes in contracts for purchase occur subsequent to the date of application, but prior to the date of the final public hearing, it is the responsibility of the applicant, or agent on his behalf, to submit a supplemental disclosure of interest form.

Revised 2023

Page 3 of 8



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DESCRIPTION OF PROPERTY

A. PARCEL I.D. NUMBER:

B. LEGAL DESCRIPTION: (multi-line, fillable areas will hold as much text as needed)

C. GENERAL LOCATION

D. Section:	Township: _	Range:	
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E. PLANNING COMMUNITY: _____ F. TAZ:

G. SIZE IN ACRES: _____ H. ZONING:

I. FUTURE LAND USE MAP DESIGNATION(S): _____

J. SURROUNDING LAND USE PATTERN:

TYPE OF REQUEST

Α. **GROWTH MANAGEMENT PLAN ELEMENT (S) TO BE AMENDED:**

	Housing Element		Recreation/Open Space
	Traffic Circulation Sub-Element		Mass Transit Sub-Element
	Aviation Sub-Element	_	Potable Water Sub-Element
	Sanitary Sewer Sub-Element	_	NGWAR Sub-Element
	Solid Waste Sub-Element		Drainage Sub-Element
	Capital Improvement Element		CCME Element
	Future Land Use Element		Golden Gate Master Plan
	Immokalee Master Plan		
B. AMEND	PAGE (S): OF TH	E:	ELEMENT
Revised 2023			Page 4 of 8



AS FOLLOWS: (Use Strike-through to identify language to be deleted; Use Underline to Identify language to be added). (multi-line, fillable areas will hold as much text as needed)

C. AMEND FUTURE LAND USE MAP(S) DESIGNATION FROM:

TO:

D. AMEND OTHER MAP(S) AND EXHIBITS AS FOLLOWS: (Name & Page #)

E. DESCRIBE ADDITINAL CHANGES REQUESTED:

REQUIRED INFORMATION

NOTE: ALL AERIALS MUST BE AT A SCALE OF NO SMALLER THAN I"=400'. At least one copy reduced to 8-1/2 x 11 shall be provided of all aerials and/or maps.

LAND USE

Provide general location map showing surrounding developments (PUD, DRI's, existing zoning) with subject property outlined.

Provide most recent aerial of site showing subject boundaries, source, and date.

Provide a map and summary table of existing land use and zoning within a radius of 300 feet from boundaries of subject property.

FUTURE LAND USE DESIGNATION:

Provide map of existing Future Land Use Designation(s) of subject property and adjacent lands, with acreage totals for each land use designation on the subject property.

ENVIRONMENTAL

Provide most recent aerial and summary table of acreage of native habitats and soils occurring on site. HABITAT IDENTIFICATION MUST BE CONSISTENT WITH THE FDOT-FLORIDA LAND USE, COVER AND FORMS CLASSIFICATION SYSTEM (FLUCCS CODE). NOTE: THIS MAY BE INDICATED ON SAME AERIAL AS THE LAND USE AERIAL IN "A" ABOVE.

Provide a summary table of Federal (US Fish & Wildlife Service) and State (Florida Game & Freshwater Fish Commission) listed plant and animal species known to occur on the site and/or known to inhabit biological communities similar to the site (e.g. panther or black bear range, avian rookery, bird migratory route, etc.) Identify historic and/or archaeological sites on the subject property.

Revised 2023

Page 5 of 8



GROWTH MANAGEMENT

INSERT "Y" FOR YES OR "N" FOR NO IN RESPONSE TO THE FOLLOWING:

Is the proposed amendment located in an Area of Critical State Concern? (Reference , F.A.C.). IF so, identify area located in ACSC.

Is the proposed amendment directly related to a proposed Development of Regional Impact pursuant to Chapter 380 F.S.? (Reference , F.A.C.)

Is the proposed amendment directly related to a proposed Small Scale Development Activity pursuant to Subsection 163.3187 (1)(c), F.S.? Does the proposed amendment create a significant impact in population which is defined as a potential increase in County-wide population by than 5% of population projections? (Reference Capital Improvement Element Policy 1.1.2). If yes, indicate mitigation measures being proposed in conjunction with the proposed amendment.

Does the proposed land use cause an increase in density and/or intensity to the uses permitted in a specific land use designation and district identified (commercial, industrial, etc.) or is the proposed land use a new land use designation or district? (Reference F.A.C.). If so, provide data and analysis to support the suitability of land for the proposed use, and of environmentally sensitive land, ground water and natural resources. (Reference , F.A.C.)

Provide map of existing Future Land Use Designation(s) of subject property and adjacent lands, with acreage totals for each land use designation on the subject property.

PUBLIC FACILITIES

Provide the existing Level of Service Standard (LOS) and document the impact the proposed change will have on the following public facilities:

Potable Water Sanitary Sewer Arterial & Collector Roads; Name specific road and LOS

Drainage

Solid Waste

Parks: Community and Regional

If the proposed amendment involves an increase in residential density, or an increase in intensity for commercial and/or industrial development that would cause the LOS for public facilities to fall below the adopted LOS, indicate mitigation measures being proposed in conjunction with the proposed amendment.

Revised 2023

Page 6 of 8



(Reference Capital Improvement Element Objective 1 and Policies):

Provide a map showing the location of existing services and public facilities that will serve the subject property (i.e. water, sewer, fire protection, police protection, schools and emergency.

Document proposed services and public facilities, identify provider, and describe the effect the proposed change will have on schools, fire protection and emergency medical services.

F. OTHER

Identify the following areas relating to the subject property:

Flood zone based on Flood Insurance Rate Map data (FIRM).

Location of wellfields and cones of influence, if applicable. (Identified on Collier County Zoning

Maps) Coastal High Hazard Area, if applicable

High Noise Contours (65 LDN or higher) surrounding the Naples Airport, if applicable (identified

on Collier County Zoning Maps).

SUPPLEMENTAL INFORMATION

\$16,700.00 non-refundable filing fee made payable to the Board of County Commissioners due at time of submittal. (Plus, proportionate share of advertising costs)

\$9,000.00 non-refundable filing fee for a Small-Scale Amendment made payable to the Board of County Commissioners due at time of submittal. (Plus, proportionate share of advertising costs)

Proof of ownership (copy of deed)

Notarized Letter of Authorization if Agent is not the Owner (See attached form)

* If you have held a pre-application meeting within 9 months prior to submitted date and paid the pre-application fee of \$500.00 at the meeting, deduct that amount from the above application fee amount when submitting your application. All pre-application fees are included in the total application submittal fee if petition submitted within 9 months of pre-application meeting date. Otherwise the overage will be applied to future proportionate share advertising costs.

* Maps shall include: North arrow, name and location of principal roadways and shall be at a scale of 1"=400' or at a scale as determined during the pre-application meeting.

* All attachments should be consistently referenced as attachments or exhibits, and should be labeled to correlate to the application form, e.g. "Exhibit I.D."

* Planning Community, TAZ map, Traffic Analysis Zone map, Zoning maps, and Future Land Use Maps. Some maps are available on the Zoning Division website depicting information herein:

Zoning Services Section: _____ Comprehensive Planning Section: _____

Revised 2023

Page 7 of 8

LETTER OF AUTHORIZATION

TO WHOM IT MAY CONCERN:

I hereby authorize _____

(Name of Agent)

to serve as my Agent in a request to amend the Collier County Growth Management Plan affecting property identified in this Application.

Signed: _

(Name of Owner(s) of Record)

Date:

I hereby certify that I have the authority to make the foregoing application, and that the application is true, correct and complete to the best of my knowledge.

Signature of Applicant

Name - Typed or Printed

STATE OF FLORIDA, COUNTY OF COLLIER

The fore	egoing instrumen	t was ackno	wledge	d befc	ore me by means of	physical presence of	or online registration
this	day of	, 20	, by			who is	personally known to me
				or	has produced		as identification.

Notary Seal

Signature of Notary Public

Print Name of Notary Public

NOTICE - BE AWARE THAT:

Florida Statute Section 837.06 - False Official Law states that: "Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided by a fine to a maximum of %500.00 and/or maximum of a sixty day jail term."

Revised 2023

Page 8 of 8

RESOLUTION 12-234

A RESOLUTION ESTABLISHING GENERAL REQUIREMENTS AND PROCEDURES FOR AMENDING THE COLLIER COUNTY GROWTH MANAGEMENT PLAN.

WHEREAS, Chapter 163, Florida Statutes, requires local governments to prepare and adopt a Comprehensive Plan; and

WHEREAS, the Board of County Commissioners adopted the Collier County Growth Management Plan on January 10, 1989; and

WHEREAS, the Community Planning Act of 2011 (Section 163.3161, et seq., Florida Statutes) mandates certain procedures to amend adopted Growth Management Plans (Section 163.3184 and Section 163.3187, Florida Statutes); and

WHEREAS, in order to provide adequate notice, it is necessary to set forth the requirements and procedures to be followed by petitioners, the general public and Collier County in processing amendments to the Collier County Growth Management Plan consistent with the requirements of the Florida Statutes.

NOW, THEREFORE BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF COLLIER COUNTY, FLORIDA, that:

1. Subject to prior Board approval, staff will implement three amendment cycles during which applications for amendments to the Collier County Growth Management Plan or one of its elements ("GMP") will be processed. Additional GMP amendment cycles can only be implemented by approval of the Board. Such approval shall be by majority vote.

2. All amendments must strictly conform with the Florida Growth Management Act, including, but not limited to, Section 163.3184, Florida Statutes, for amendments in general, and Section 163.3187, Florida Statutes, for adoption of a small-scale comprehensive plan amendments.

3. An amendment may be proposed by the Board of County Commissioners, the Collier County Planning Commission (CCPC), any department or agency of the County, or any private person, provided, however, that no such person shall propose an

10

amendment for a land use designation change for property which he or she does not own, except as an agent or attorney for the owner.

4. All required copies of the application to amend the Collier County Growth Management Plan and supporting documentation along with the required filing fee must be submitted to the County Manager or his designee prior to the deadline established by the Board for each adoption cycle. Following the requisite submission:

A. Prior to submittal, a pre-application conference shall occur between the petitioner and appropriate County staff to ensure that the amendment procedure is understood and adhered to.

B. Staff shall perform an initial review of the proposed amendment application to determine whether additional information is necessary to enable staff to conduct a formal review and whether other amendments of the Growth Management Plan will be necessary to preserve the internal consistency of the Plan. Within 30 calendar days following the filing deadline, the staff shall notify the petitioner in writing, that:

(i) staff has determined that the petition is adequate for formal review; or

(ii) the application is inadequate for formal review and the notice shall set forth in detail the additional information deemed necessary for formal review of the petition.

C. If the application is deemed insufficient, the petitioner shall have 30 calendar days from the date of receipt of staff's letter of insufficiency to supplement the application in response to the initial review. A second 30 day time period to respond to the insufficiency may be requested by the petitioner.

D. County staff shall review the application and may consult with other County Departments or agencies as it deems necessary to evaluate the proposed amendment and shall prepare a report with a recommendation.

E. The Public Hearings schedule and State Agency review time frames will be those as established by Section 163.3184, Florida Statutes, "Process for adoption of comprehensive plan or plan amendment.", or Section 163.3187, Florida Statute, "Process for adoption of small-scale comprehensive plan amendment," as amended from time-totime. Adoption of an amendment to the Growth Management Plan must be by Ordinance and shall require four affirmative votes of the Board of County Commissioners. 5. This Resolution supersedes and repeals Resolution 97-431, as amended by Resolution 98-18, relating to prior Growth Management Plan Amendment procedures.

THIS RESOLUTION ADOPTED after motion, second and majority vote favoring same, this 13th day of November, 2012.

ATTEST: - TANK DWIGHT E. BROCK, CLERK By Deput as to Attest O

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61008

BOARD OF COUNTY COMMISSIONERS COLLIER COUNTY, FLORIDA

By: FREI

to form and legal sufficiency: oved Jeffrey A. Klackow County Attorney