

#### Growth Management Community Development Department 2800 North Horseshoe Drive, Naples, Florida 34104 Phone: (239) 252-1036 | Email: GMDClientServices@colliercountyfl.gov www.colliercountyfl.gov

#### **PROPERTY OWNERSHIP DISCLOSURE FORM**

This is a required form with all land use petitions, except for Appeals and Zoning Verification Letters.

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.

# Please complete the following, use additional sheets if necessary.

a. If the property is owned fee simple by an <u>INDIVIDUAL</u>, 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:

Name and Address	% of Ownership

b. If the property is owned by a <u>CORPORATION</u>, list the officers and stockholders and the percentage of stock owned by each:

Name and Address	% of Ownership

c. If the property is in the name of a <u>TRUSTEE</u>, list the beneficiaries of the trust with the percentage of interest:

Name and Address	% of Ownership



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d. If the property is in the name of a <u>GENERAL</u> or <u>LIMITED PARTNERSHIP</u>, list the name of the general and/or limited partners:

Name and Address	% of Ownership

e. If there is a <u>CONTRACT FOR PURCHASE</u>, 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 and Address	% 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 and Address		

g. Date subject property acquired \_\_\_\_\_

Leased: Term of lease \_\_\_\_\_ years /months

If, Petitioner has option to buy, indicate the following:



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Date of option: \_\_\_\_\_

Date option terminates: \_\_\_\_\_, or

Anticipated closing date: \_\_\_\_\_

### AFFIRM PROPERTY OWNERSHIP INFORMATION

Any petition required to have Property Ownership Disclosure, will not be accepted without this form. Requirements for petition types are located on the associated application form. Any change in ownership whether individually or with a Trustee, Company or other interest-holding party, must be disclosed to Collier County immediately if such change occurs prior to the petition's final public hearing.

As the authorized agent/applicant for this petition, I attest that all of the information indicated on this checklist is included in this submittal package. I understand that failure to include all necessary submittal information may result in the delay of processing this petition.

\*The completed application, all required submittal materials, and fees shall be submitted to: Growth Management Community Development Department | GMD Portal: https://cvportal.colliercountyfl.gov/cityviewweb

Questions? Email: GMDclientservices@colliercountyfl.gov

Agent/Owner Signature

Date

Agent/Owner Name (please print)