

**CITY OF BROOKSVILLE
SPECIAL EXCEPTION USE PETITION CHECKLIST**

Petitioner: _____ **Petition # SEU** _____

Address: _____

Phone# _____ **Email:** _____

TO BE PROVIDED BY PETITIONER

_____ Cover letter with brief narrative describing the proposed project

_____ Pictures (optional)

_____ Proof of Ownership (i.e. copy of deed)

_____ Owner or Agent Affidavit (standard form attached)

_____ Petition (Standard form attached)

_____ List of properties located within 150 feet of subject site, including list of addresses for certified mailing. (Obtain this information from the Hernando County Property Appraiser's office - separate fee assessed by Property Appraiser's office)

_____ List of properties located within 151 feet through 300 feet of subject site, including list of addresses for standard mailing. (Obtain this information from the Hernando County Property Appraiser's office - separate fee assessed by Property Appraiser's office) (Art VIII, Section 8-2.7, City Land Dev. Code)

_____ Preliminary Development Plan (Required by Planning and Zoning Commission-see Art VIII, Section 8-2.7, City Land Dev. Code)

A Preliminary Development Plan shall contain the following information:

- a. The name of the proposed project and the names of the developer(s), architect(s), engineer(s), and planner(s) associated with the project;
- b. Scale, date and north arrow.
- c. A vicinity map showing the relationship of the proposed project to the surrounding road network and major water bodies, if any;
- d. Location, height, floor area, and use of existing structures, if any;
- e. All land uses and the general location of structures within one hundred fifty (150) feet of the boundaries of the project site;
- f. Current zoning designation on the site and within 150 feet of the boundaries of the project site;
- g. All property lines within 150 feet of the boundaries of the project site;

- h. The height, yards, floor area (or number of dwelling units for residential uses), and use or uses for structures in each portion of the proposed project. A complete list of proposed uses shall be provided;
- i. The total number and the types of residential units, and the type, density and overall density of the project, if applicable;
- j. The total non-residential square footage and the Floor Area Ratio of each non-residential land use type;
- k. The general location and nature of fences, walls, and buffering to be provided;
- l. Proposed building envelopes;
- m. The location of all water courses, lakes, conservation areas, preservation areas, wooded areas, upland habitat areas, or other such natural physical features on the project site.

NOTE: Items (e) thru (g) above will be obtained from the Hernando County's Property Appraiser web site by Community Development staff.

REVIEW FEE -\$250.00 + Administrative Costs (See Resolution No. 2018-01) \$ _____

CERTIFIED LETTERS (\$1.00 Administrative Cost + Certified/Return Receipt + postage per letter) \$ _____

STANDARD LETTERS (\$1.00 Administrative Cost + postage per letter) \$ _____

Check # _____ Receipt# _____ **TOTAL** \$ _____

ALL ADVERTISED PUBLIC HEARING NOTICES ARE PAID BY THE PETITIONER.
(Newspaper bills petitioner directly)

RECORDING FEES TO BE DETERMINED AFTER APPROVAL/DENIAL OF SUBJECT PETITION.

Petitioner's Portion Complete Planning and Zoning Commission Meeting Date: _____

Reviewed for sufficiency completed by: _____ Date: _____

APPOINTMENT OF AGENT

**CITY OF BROOKSVILLE
COUNTY OF HERNANDO
STATE OF FLORIDA**

I, _____, the owner(s) in fee simple of the below described real property hereby appoint _____ as my (our) agent to file required petitions, sign required documents, make representations as to issues of fact and to appear, as may be necessary, before the appropriate City of Brooksville authority. My agent shall also have the authority to commit myself as owner to the necessary future performance conditions as may be directed by the appropriate City authority as a condition of granting my petition.

(Insert Legal Description Below)

Signature of Owner

Printed Name of Owner

Date

Signature of Owner

Printed Name of Owner

Date

Signed in the presence of:

WITNESSES:

Signature of Witness

Printed Name of Witness

Date

Signature of Witness

Printed Name of Witness

Date

OWNER OR AGENT AFFIDAVIT

**CITY OF BROOKSVILLE
COUNTY OF HERNANDO
STATE OF FLORIDA**

I, _____, being duly sworn, hereby depose and say _____ is (are) the owner(s) of the herein described property to-wit:

(Insert Legal Description Below)

Signature of Owner

Printed Name of Owner

Date

Signature of Owner

Printed Name of Owner

Date

STATE OF FLORIDA
COUNTY OF HERNANDO

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____, by _____, (Print Name(s)), who is (are) personally known to me _____ or who has produced identification _____, Driver's License #: _____.

Signature of Notary Public

Notary Stamp/Seal

CITY OF BROOKSVILLE SPECIAL EXCEPTION USE PETITION

Print/type all information. If you need assistance, please call the Community Development Department at (352) 540-3810.

PROPERTY OWNERS AND REPRESENTATIVE INFORMATION:

CURRENT PROPERTY OWNER:	
APPLICANT:	
Mailing Address:	
Daytime Telephone:	E-Mail Address:
REPRESENTATIVE:	
Mailing Address:	
Daytime Telephone:	E-Mail Address:
PRIMARY CONTACT FOR THIS APPLICATION:	
Daytime Telephone:	E-Mail Address:

PROPERTY INFORMATION:

Street address of site location:
Legal Description:
Size of Area Covered by Application:
Highway and Street Boundaries:
Current Zoning Classification:
Special Exception Requested:
Has a public hearing been held on this property within the past twelve months?

ACKNOWLEDGMENT

This acknowledgment must be signed in the presence of a Notary Public.

I, _____, hereby state and affirm that all information submitted within this petition is in all respects true and correct to the best of my knowledge and belief and that:

- I am the owner of the property covered under this application.
- I am the legal representative of the owner or lessee of the property described, which is the subject matter of this application.

Signature of Applicant or Representative

**STATE OF FLORIDA
COUNTY OF HERNANDO**

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me or who has produced _____ as identification.

Signature of Notary Public

Notary Seal/Stamp