

**Application for an Amendment**  
**to the**  
**Volusia County Comprehensive Plan**

This application is intended to accommodate the primary information needs for all amendment requests. You may be required to submit additional information for the County's review process. If you have any questions relating to this application, please call the Comprehensive Planning Department at (386) 736-5959, ext 2022.

**1. Application Type**

<b>Small Scale Amendment:</b> A small scale amendment is generally defined as being a parcel(s) of land less than 10 acres in size and, if residential, proposing a density less than 10 units per acre. [See s. 163.3187(1)(c) F.S. for complete definition.]	
<b>Large Scale Amendment:</b> A large scale amendment is generally defined as being a parcel(s) of land 10 acres in size or greater.	
<b>Text Amendment:</b> Text Amendments to the Goals, Objectives and Policies of the Comprehensive Plan are processed as Large scale amendments.	
<b>Thoroughfare Map Amendment</b>	
<b>Development of Regional Impact:</b> Defined by Section 380.06, Florida Statutes	
<b>Development of Regional Impact Notice of Proposed Change</b>	

**You may submit your application in person or by mail. Please submit your application to:**

Planning and Development Services  
 Comprehensive Planning  
 123 West Indiana Avenue, Room 200  
 Deland, FL 32720-4604

<b>For Office Use Only</b>	
<b>Date Stamp:</b>	<b>Received by:</b>

**2. Contact Information**

	Applicant/Authorized Agent**	Property Owner *
Name		
Address		
Phone		
FAX		
Email		

\* If the Owner is a corporation or Trust, Give the Name and Title of the person who can legally sign on behalf of the corporation and provide Documentation that they have legal Authority.

\*\* Proof of property owner's authorization is required when submittal is signed by authorized agent.

What is the relationship between Applicant and Owner? \_\_\_\_\_

**Note: Required Ownership Information.**

List all persons who have ownership interest in the property by Name and address. Attach separate sheets if necessary.

In the case of a Trust, list the name and address of each trustee.

In the case of a Corporation, list the Corporate Officer(s) who has authority to act on behalf of the corporation and provide documentation of said authority.

Is there an existing contract of sale or option to purchase on the subject property?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list names and addresses of all parties to the contract and/or option. Notify this office if ownership changes during the period of this amendment process.

**3. Project Information (To be completed by Applicant)**

Project Name	
Site Address	
General Location (include distance and direction from nearest cross-roads)	
Tax Parcel ID Number(s)	
Size of Property (acres or square feet)	
<b>Existing Conditions</b>	
Current Future Land Use Designation	
Current Zoning Designation	
Existing Use(s)	
<b>Proposed Conditions</b>	
Proposed Future Land Use Designation	
Proposed Zoning Designation	
Proposed Use(s) (Include densities/intensities per types of use)	
<b>Service Providers</b>	
Sanitary Sewer	
Potable Water	
Reclaimed Water	

#### 4. Required Supplemental Information

- \_\_\_\_\_ Pre-Application Meeting. Date of meeting \_\_\_\_\_.
- \_\_\_\_\_ Application Fee.
- \_\_\_\_\_ Proof of Ownership. A property owner printout from the Property Appraiser dated as of the date of the application. Deeds will not be accepted as proof of ownership.
- \_\_\_\_\_ Ownership Disclosure Form. (attached)
- \_\_\_\_\_ Applicant Authorization Form. (attached)
- \_\_\_\_\_ Statement of Understanding. (attached)
- \_\_\_\_\_ Boundary Survey. Two Copies. Must be signed and dated with last two years.
- \_\_\_\_\_ Legal Description. Provide paper and digital (disk or email) word format.
- \_\_\_\_\_ Vicinity Map. Show the property location in relation to major roads and area within 2 mile radius of the proposed amendment site. 8 ½ x 11.
- \_\_\_\_\_ Statement of Justification. Attach a narrative describing the justification for the request, using support material, including but not limited to Volusia County Comprehensive Plan adopted Goals, Objectives and Policies. Note: Any Plan Map Amendment which seeks to convert an area from a non-urban to an urban land use designation must specifically address Policy 1.3.1.28.
- \_\_\_\_\_ School Impact Analysis. (If Residential) Contact the Volusia County School Board Facilities Services Department at (386) 947-8786.
- \_\_\_\_\_ Transportation Analysis. A Multimodal Transportation Analysis shall be required for any change of use when trip ends generated by the proposed change of use equal or exceed 1000 trip ends per day, or when deemed necessary by the Director of Traffic Engineering. The analysis shall be performed for the most trip intensive use as defined by the latest edition of the ITE Trip Generation Manual within the proposed Land Use category. Contact the Volusia County Traffic Engineering Department at (386) 736-5968 ext. 2709 for study area requirements.
- \_\_\_\_\_ Environmental Impact Analysis. (Required for all sites 1 acre or greater) The analysis shall be conducted by a qualified biologist and dated less than one year old. The analysis shall document the types of habitat found on site; identify vegetation types, soils types, wetlands, floodplain; and must identify the presence of any threatened or endangered species and/or species of special concern.  
  
If the property has been identified by Volusia County Environmental Management as containing habitat that has the potential to be occupied by the Florida scrub jay, a five-day scrub jay survey conforming to United States Fish and Wildlife Survey guidelines is required. The survey may be no more than one year old.
- \_\_\_\_\_ Letters of Capacity Availability. For each public service provider (potable water, sanitary sewer, reclaimed water) a letter shall be submitted, signed by the public service provider, which states:
  - 1) the project's capacity requirements at build-out based on maximum development potential; and,
  - 2) provides data on existing and future plant/public facility capacity; and,
  - 3) provides data on the capacity of the public facility that is unencumbered for other uses; and,
  - 4) provides a statement on the ability of the plant to serve the project.
  - 5) For potable water facilities, submit a complete the SJRWMD's water supply availability worksheet. The worksheet is available on line at:  
[http://www.sjrwmd.com/comprehensiveplanning/potable\\_water\\_worksheet.doc](http://www.sjrwmd.com/comprehensiveplanning/potable_water_worksheet.doc)

**5. Ownership Disclosure Form**

**Please provide the information as requested below. (Use additional sheets if necessary)**

**1. List all persons who have an ownership interest in the property, which is the subject matter of this petition, by name and address.**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone # \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone # \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone # \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone # \_\_\_\_\_

**2. For each corporate owner, list the name, address, and title of each officer of the corporation.**

Name of Corporation: \_\_\_\_\_  
Officer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name of Corporation: \_\_\_\_\_  
Officer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name of Corporation: \_\_\_\_\_  
Officer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name of Corporation: \_\_\_\_\_  
Officer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**3. In the case of a trust, list the name and address of each trustee.**

Name of Trust: \_\_\_\_\_  
Trustee: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Trustee: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Trustee: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Trustee: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**6. Authorization of Owner.**

I/We \_\_\_\_\_,

As the sole or joint fee simple title holder(s) of the property described as:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Legal description or parcel ID number(s))

Authorize \_\_\_\_\_ to act as my agent to  
(Applicant's name)  
seek a Future Land Use Map Amendment from \_\_\_\_\_ to \_\_\_\_\_  
on the above described property.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Type or Print Owner's Name

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Type or Print Owner's Name

\*If additional Owner's names are required, attach additional signature pages.

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_  
(Date)  
by \_\_\_\_\_, who is personally known to me or  
(Name of person acknowledging)  
who has produced \_\_\_\_\_ as identification and  
(Type of identification)  
who did not take an oath.

\_\_\_\_\_  
Notary Public, State of Florida

\_\_\_\_\_  
Type or Print Name

Commission No.: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

**7. Statement of Understanding.**

By my signature hereto, I do hereby certify that the information contained in this application is true and correct to the best of my knowledge, and understand that deliberate misrepresentation of such information may be grounds for denial or reversal of this application and/or revocation of any approval based upon this application.

I hereby authorize Volusia County staff permission to view and enter upon the subject property for the purposes of investigating and reviewing this request.

I understand that this application and payment of fees for the processing and public hearing advertisement does not imply or guarantee that an amendment of the Volusia County Comprehensive Plan, maps(s) or for the Future Land Use of the subject property(ies) will be approved.

I understand that a formal concurrency review will be required if/when a final development order is issued for this project and that any statement of capacity availability provided for review of this proposed Future Land Use Amendment does not constitute concurrency review, nor does it constitute a reservation of said capacities. I specifically acknowledge that any proposed development on the subject property will be required to undergo Concurrency Review and meet all Concurrency requirements at the time of development.

\_\_\_\_\_  
Signature of Owner/Applicant  
(\* Proof of property owner's authorization is required with submittal if signed by someone other than the property owner.)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type Name