

CITY OF DEBARY

APPLICATION FOR AMENDMENT TO THE ZONING ORDINANCE

- 1) This is a request for change of classification from _____ to _____ on the property described below.
- 2) For amendment to existing PUD/New PUD's, complete the following:

NAME OF PUD _____

Total number of proposed dwelling units* _____
If this is a PUD amendment, what is the total increase/decrease in the number of proposed dwelling units _____. (*If applicable.)

- 3) Comprehensive Plan Land Use Designation _____

Property is located in Section _____, Township _____ South, Range _____ East.

Size of Parcel: _____ Tax Parcel Number: _____

Address of Property: _____

Circle Applicable Utility Provision:

Private Septic and/or Well Central Sewer and/or Water (by whom _____) Other _____

This property is located on the _____ side of _____ road approximately _____ feet/miles N, E, S, W of its intersection with _____ road. The property is near _____ in the City of DeBary.

Applicant's Name: _____ Phone: () _____

Address: _____
Street

City

State

Zip Code

Status: _____ Owner _____ Attorney for Owner
 _____ Agent for Owner _____ Contract Purchaser

If applicant does not own the property, provide the following:

Owner's Name: _____ Phone: () _____

Address: _____
Street

City

State

Zip Code

CASE NO.: _____

TO BE SUPPLIED AT TIME OF SUBMISSION:

- o 2 Copies of Legal Description
- o 2 Current Surveys of Property (No older than 2 years)
- o Notarized Authorization of Owner (If Applicant is other than owner or attorney for owner)
- o Application Fee

ADDITIONAL ITEMS FOR PUD AMENDMENT

- o 3 copies of proposed Written Development Agreement (Order & Resolution format)
- o 13 copies of Preliminary Plan (Ref. Section 813.05(B)(1) for RPUD; Section 813.05(C)(1) for BPUD, IPUD, and MPUD)
- o Evidence of Unified Ownership (Ref. Section 813.01) (References are to the Volusia County Zoning Ordinance.)

* * * * *

ALL SUBMITTALS MUST BE MADE IN PERSON AND FEES MUST BE PAID BEFORE APPLICATION WILL BE ACCEPTED BY 12:00 NOON ON FILING DEADLINE DATE.

IF THIS APPLICATION IS APPROVED, ALL OTHER COUNTY ORDINANCES SHALL BE COMPLIED WITH AND FEES PAID.

This request will have the first reading by the City Council on _____, 19____, the final reading and adoption hearing on _____, 19____, in the DeBary Fire Hall, 12 Columba Road, DeBary, at 7:00 P.M.

APPLICANT'S RIGHTS FOR REHEARING AND RES JUDICATA ARE STATED IN SECTION 1105.00 OF THE ZONING ORDINANCE, 80-8, as amended.

EX-PARTE CONTACTS MUST BE CONSISTENT WITH RESOLUTION 95-19. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE CITY OF DEBARY AT 668-2040.

Signature of Applicant: _____

* * * * *

DO NOT WRITE BELOW THIS LINE

Two public hearings are required if the subject property is 5% (586.6 acres) or more of the total land of the City of DeBary as of January 1, 1994.

Date Submitted: _____ Individual Accepting App. _____

FILING FEE PAID: _____ RECEIPT# _____ OFFICE _____

CASE NUMBER	NAME
-------------	------
