

Community Development  
 7525 NW 88<sup>th</sup> Avenue  
 Tamarac, FL 33321  
 Telephone (954) 597-3530  
 Fax (954) 597-3540

**FOR STAFF USE ONLY:**

**CASE #:** \_\_\_\_\_  
**Master File #:** \_\_\_\_\_  
**Project #:** \_\_\_\_\_  
**Date Received:** \_\_\_\_\_  
**Received by:** \_\_\_\_\_  
**Zoning district:** \_\_\_\_\_  
**Land Use Classification:** \_\_\_\_\_  
**Surrounding zoning:**  
 North: \_\_\_\_\_  
 South: \_\_\_\_\_  
 East: \_\_\_\_\_  
 West: \_\_\_\_\_  
**Fee(s) Collected:** \_\_\_\_\_

**SP-CASE DEVELOPMENT APPLICATION**  
**Administrative Minor Revised Site Plan**  
 (Incomplete Applications will not be accepted.)

**Project Name:** \_\_\_\_\_

**Project Address (if applicable):** \_\_\_\_\_

**Project Location:** \_\_\_\_\_

**Parcel Size:** \_\_\_\_\_ acres/sq. ft. **Folio No.** \_\_\_\_\_

**Project Description:** \_\_\_\_\_

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

(Identify modifications being made to the site including # of units, sq. footage, etc.)

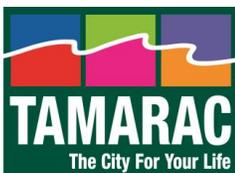
Agent/Contact: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_  
 Property Owner's Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Address: \_\_\_\_\_

## **ADMINISTRATIVE MINOR REVISED SITE PLAN SUBMMITAL CHECKLIST**

The following checklist is designed to assist the applicant in preparing the required materials for review. The application will **not** be accepted if all required items are not present at the time of submittal. The following items are required as part of a complete application for an Administrative Minor Revised site plan application:

- 1. A completed City of Tamarac SP-Case Development Application.
- 2. Justification Letter. The letter should provide details on the proposed project including, but not limited to the scope of work, size, history of the project (if applicable), benefits of development to the City, and possible tenants/companies, etc.
- 3. Property Owner Consent Form. This form must be completed by the property owner. The form names that person (designated agent) who will represent the said application.
- 4. Proof of property ownership. (i.e. deed, property appraiser or contract to purchase)
- 5. One (1) copy of a signed and sealed "As-Built" survey dated within the last twelve (12) months.
- 6. A signed and sealed copy of a site plan (Refer to Chapter 10, Article III "Site Plan Submission" of the Code of Ordinances for complete site plan requirements). The site plan must encompass all proposed and approved changes to the property on record.
- 7. Appropriate fees.

**\*\*INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED\*\***



**PROPERTY OWNER CONSENT FORM**

DESIGNATION OF AGENT

DATE: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

**IN THE MATTER OF:**

**ANY PERSON APPEARING ON YOUR BEHALF, IN YOUR ABSENCE, MUST BE DESIGNATED AS YOUR AGENT ON THIS FORM OR SUCH PERSON WILL NOT BE PERMITTED TO REPRESENT AND/OR MAKE MODIFICATIONS TO THE PROPERTY.**

\_\_\_\_\_ HAS MY PERMISSION TO ACT AS MY AGENT  
(Print Name of Designated Agent)

IN ALL MATTERS RELATING TO \_\_\_\_\_,  
(Project Name)

LOCATED AT \_\_\_\_\_.  
(Address/Location of Project)

**THIS FORM MUST BE SUBMITTED WITH THE COMPLETED APPLICATION PACKAGE.**

**SIGNATURE OF OWNER:**

\_\_\_\_\_  
\_\_\_\_\_  
(Print Name of Owner)

**SIGNATURE OF DESIGNATED AGENT:**

\_\_\_\_\_  
\_\_\_\_\_  
(Print Name of Designated Agent)

**ADDRESS AND PHONE NO. OF DESIGNATED AGENT:**

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**STATE OF FLORIDA:  
COUNTY OF BROWARD:**

The forgoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
by \_\_\_\_\_, the owner of the property, who is personally known to me or has  
produced identification (\_\_\_\_\_) and who (did/did not) take an oath.  
(Type of Identification)

**Notary Public State of Florida:**

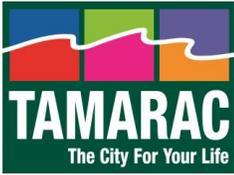
\_\_\_\_\_

**My Commission Expires:**

\_\_\_\_\_

**Type or print name of Notary:**

\_\_\_\_\_



## COMMUNITY DEVELOPMENT REVIEW FEE SCHEDULE

### Land Use Planning:

Large Scale	\$ 5,000
Small Scale	\$ 3,000
Reserve Units	\$ 500
Flexibility Units	\$ 500

### Platting:

Plats	\$ 3,000
Delegation Request	\$ 1,500
Vacation of Easements/Rights-of-Way	\$ 1,000

### Rezoning:

Rezoning	\$ 1,500
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### Special Exception:

Special Exception	\$2,000
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### Site Planning:

Site Plan (New)	\$ 3,000
Site Plan Revision (Major)	\$ 3,000
Site Plan Revision (Minor)	\$ 1,250
Site Plan Revision (Administrative)	\$ 250
Site Plan Extension	\$ 1,000
Model Sales	\$ 1,000
Parking Waiver	\$ 2,500
Action Plan	\$ 1,000

### Variances:

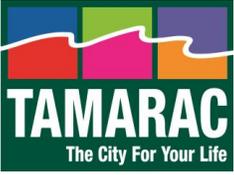
Sign Variance	\$ 600
Zoning Variance	\$ 1,000

### Renaming of Street:

Renaming of Street	\$ 200
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### Staff Research:

Research Hourly Rate	\$ 75
Zoning Verification	\$ 200



## ENGINEERING PLAN REVIEW FEE SCHEDULE

**\*\* Engineering Fees to be paid upon application submittal and each improvement submittal \*\***

**Development Review Committee (Site Plan Reviews).....\$300.00**

**Development Review Committee (Site Plan Revisions).....\$150.00**

**Development Review Committee (Plat Reviews).....\$300.00**

**Development Review Committee (Delegation Request Reviews).....\$150.00**

**Development Review Committee (Vacation of Easements/Right-of-Ways).....\$100.00**