



APPLICATION NUMBER

SITE DEVELOPMENT PLAN APPLICATION FOR

DEVELOPMENT DESCRIPTION

Development Name: _____

Proposed development by use and intensity: _____

PROPERTY DESCRIPTION

Nearest cross streets: _____

Site address or location: _____

Property folio number: _____

Gross acres: _____ Net acres: _____

OWNER, APPLICANT AND OTHER INFORMATION

Property Owner Name: _____

Mailing Address: _____

City, State & Zip Code: _____

Phone #: _____ Mobile Phone #: _____

Email: _____ Fax #: _____

Applicant Name: _____

Mailing Address: _____

City, State & Zip Code: _____

Phone #: _____ Mobile Phone #: _____

Email: _____ Fax #: _____



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Besides the applicant, who else should be provided copies of written correspondence?

- Owner Architect Attorney
 Engineer Other (Specify) _____

Architect Name: _____

Address: _____

City, State & Zip Code: _____

Phone #: _____ Mobile Phone #: _____

Email Address: _____ Fax #: _____

Engineer Name: _____

Address: _____

City, State & Zip Code: _____

Phone #: _____ Mobile Phone #: _____

Email Address: _____ Fax #: _____

Attorney Name: _____

Address: _____

City, State & Zip Code: _____

Phone #: _____ Mobile Phone #: _____

Email Address: _____ Fax #: _____



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SUMMARY OF SITE DEVELOPMENT PLAN REQUEST

- | | |
|---|---|
| <input type="checkbox"/> Residential uses
<input type="checkbox"/> Commercial retail uses
<input type="checkbox"/> Commercial office uses
<input type="checkbox"/> Commercial warehouse uses
<input type="checkbox"/> Industrial uses | <input type="checkbox"/> Recreational uses
<input type="checkbox"/> Commercial recreational uses
<input type="checkbox"/> Community facility uses
<input type="checkbox"/> Utility uses
<input type="checkbox"/> Other uses _____ |
|---|---|

RESIDENTIAL USES

1. How many residential dwelling units by housing type and bedrooms are being requested?

Housing Type	Efficiency Unit	One (1) Bedroom	Two (2) Bedrooms	Three (3) Bedrooms	4 or more Bedrooms	Total
Single Family						
Connected Units						
Duplex						
Triplex						
Quadraplex						
Townhouse						
Condominium						
Apartment						
Other						
Total Units						
Total Bedrooms						

NONE – NONRESIDENTIAL PROJECT



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2. Calculate the net and gross residential densities by acreage and bedrooms.

Density	By Acreage	By Bedrooms
Net		
Gross		

3. How do you intend to market the residential dwelling units?

- Sale
 Rental
 Sale and rental

4. How many lots will be created by this development? _____

5. Identify any accessory uses and their net square feet:

NONRESIDENTIAL USES

1. For each on-residential use identified on the site plan, identify the gross and net floor area in square feet.

Non-residential Use	Gross Floor Area	Net Floor Area
Total (add another sheet if necessary)		



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2. Calculate the net intensity of the proposed development.

Non-residential Use in Square Feet	Net Property Size in Square Feet	Net Intensity

PARKING REQUIREMENTS

1. For each use identified in the site plan, please identify the off-street parking requirement (including handicapped parking spaces), the number of parking spaces required, and the parking spaces provided. **See LDR Art III, Sec 6.5 for Parking Standards.**

Land Use Classification	Parking Ratio Requirement	Required Parking	Provided Parking

2. For each use identified in the site plan, please identify the off-street loading requirement, the number of loading spaces required, and the loading spaces provided. **See LDR Art III, Sec 6.6 for Loading Standards.**

Off-street Loading Standard for Each Use Identified on the Site Plan	Loading Spaces Required	Loading Spaces Provided
Total (add another sheet if necessary)		



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PERVIOUS AND IMPVIOUS SURFACE REQUIREMENTS

1. Identify the landscape requirements, the number of trees required, and the trees provided. **See LDR, Schedule J for Standards.**

Minimum Landscape Standard	Trees Required	Trees Provided
Landscaping abutting a right-of-way		
Perimeter landscaping abutting property line		
Perimeter landscaping abutting building		
Storage area, dumpster & equipment area landscaping		
Parking Lot medians		
Parking Lot islands		
Total landscaped areas		

2. Identify the size and the extent of land devoted to previous surfaces. **See LDR, Schedule J, Part 2.0 for Standards.**

Non-residential Use	Square Feet	Percent Impervious
Total landscaped areas		
Open space area		
Water retention area (calculate only 1/2 of square feet)		
Other (identify)		
Total		



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3. Identify the size and extent of land devoted to impervious surfaces.
See LDR, Schedule J, Part 2.0 for Standards.

Impervious Surface	Square Feet	Percent Pervious
Building coverage		
Access way coverage		
Driveway coverage		
Parking area coverage		
Storage, dumpster & equipment area coverage		
Sidewalk coverage		
Total pervious surface coverage		

ADDITIONAL INFORMATION

Have any other applications been submitted for this site? No Yes
 Describe: _____

Pre-application Conference Date _____

Official Zoning District Map classification:

Future Land Use Map Series designation:



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AFFIDAVIT

I, _____, DO HEREBY SWEAR OR AFFIRM

1. THAT ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION AND THE ATTACHMENTS IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.
2. CONSISTENT WITH THE LAND DEVELOPMENT REGULATIONS OF THE CITY OF LAUDERHILL, FLORIDA, I WILL CAUSE A SIGN AT LEAST THREE (3) SQUARE FEET IN SIZE TO BE POSTED ON THE SUBJECT PROPERTY FACING AND VISIBLE FROM THE STREET AT LEAST TEN (10) DAYS PRIOR TO THE PUBLIC HEARING. MOREOVER, I CERTIFY THE SIGN WILL REMAIN POSTED FOR THE DURATION OF THE TIME REQUIRED FOR THE POSTING OF THE SUBJECT PROPERTY AND A PHOTOGRAPH OF THE SIGN POSTED ON THE SUBJECT PROPERTY WILL BE PROVIDED TO THE CITY OF LAUDERHILL PLANNING AND ZONING DEPARTMENT AT LEAST SEVEN (7) DAYS PRIOR TO THE PUBLIC HEARING.
3. I WILL CAUSE THIS SAME SIGN TO BE REMOVED WITHIN SEVEN (7) CALENDAR DAYS AFTER THE HEARING.

PRINT YOUR NAME: _____

SIGN YOUR NAME: _____

DATE: _____

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS ____ DAY
 OF _____, 20 _____, BY _____, WHO IS
 PERSONALLY KNOWN TO ME OR WHO HAS PRODUCED _____
 AS IDENTIFICATION AND WHO DID TAKE AN OATH.

NOTARY PUBLIC

SIGN: _____

PRINT: _____

STATE OF FLORIDA AT LARGE SEAL

MY COMMISSION EXPIRES:



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ADDITIONAL DOCUMENTS REQUIRED AT TIME OF SUBMISSION

1. A check made payable to the "City of Lauderhill" for the appropriate application fee.
2. Certified Mailing list with two (2) sets of labels for all property owners within 300 feet of the site.
3. Copy of Deed or Contract to Purchase
4. Letter from property owner authorizing the Applicant to apply for a site development plan order (If applicable).
5. One (1) complete signed and sealed site plan package
6. Twelve (12) copies of site plan package. Site Plan drawings should be no larger than 24"X36".
Package should include:
 - a. Cover sheet with project description, contact information, location map and index.
 - b. Recent survey showing all existing conditions (including utility lines and sewer) with flood elevation
 - c. Proposed site plan
 - d. Civil drawings (paving, drainage, water, sewer)
 - e. Landscape, Irrigation and Tree Survey
 - f. Architectural elevations
 - g. Floor plans and tabular data.
 - h. Photometric plans
 - i. Color renderings with materials description

Fees

Site Development Plan Application Fee (To be calculated by Staff).....	<input style="width: 50px; height: 20px;" type="text"/>
Cost of Mailing (minimum amount or actual cost of mailing, whichever is greater).....	90.00
Cost of Design Review: Any review wherein the city requires assistance by outside consultants, applicant shall pay consultant's fees.	
DEPOSIT.....	2,450.00



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REAL ESTATE RESEARCH SERVICES

**Alldata Real Estate Systems, Inc.
290 NE 51st Street
Ft. Lauderdale, FL
(954) 772-1800**

**Cutro & Associates, Inc.
1025 Yale Drive
Hollywood, FL
(954) 920-2205**

**Florida Real Estate Decisions, Inc.
1500 West Cypress Creek Road
Suite 409
Ft. Lauderdale, FL
(954) 761-9003**

**Florida Real Estate Decisions, Inc.
12765 W. Forest Hill Boulevard
Suite 1314
Wellington, FL
(561) 798-4423**

**Florida Real Estate Decisions, Inc.
16375 NE 18th Avenue
Suite 300
Miami, FL
(305) 757-6884**

***The above mentioned companies have provided the required certified mailing list for previous applicants.**

This is not a recommendation just a list of companies who have provided this service in the past. Please refer to the yellow pages for additional sources.

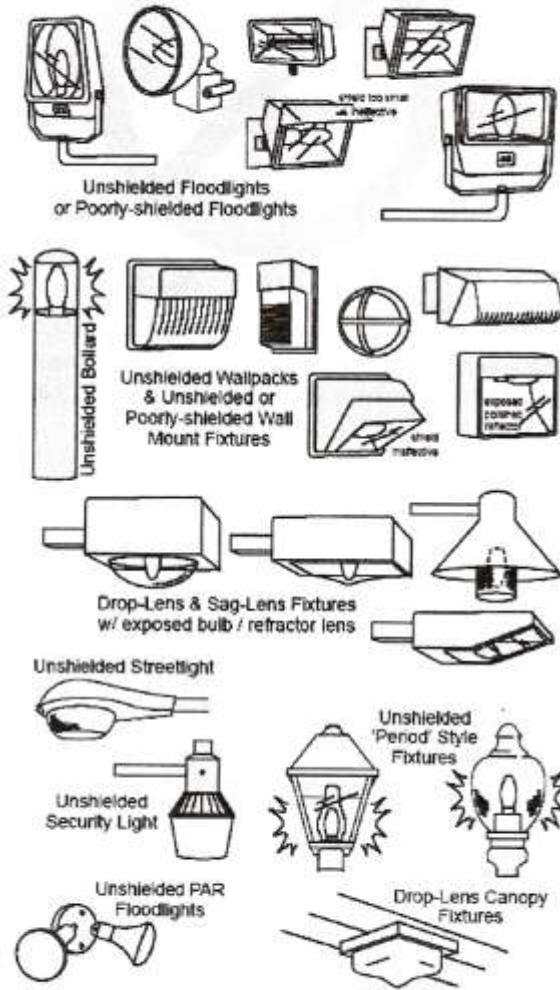


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LIGHTING FIXTURE GUIDELINES

Unacceptable Fixtures

Fixtures that produce glare and light trespass



Acceptable Fixtures

Fixtures that shield the light source to minimize glare and light trespass and to facilitate better vision at night

