



## REZONING APPLICATION CHECKLIST

- Pre-application Meeting: A pre-application meeting with a planner is required prior to submission.
- Application Processing: Applications and payments are only accepted online through [ProjectDox](#)
- Complete Application: Incomplete applications cannot be accepted.
- Application Fee: \$1,500
- Planning and Zoning Board Fee: \$250
- Public Hearing Sign Bond: \$150
- Proof of Ownership: Warranty Deed or property appraiser's information from [www.bcpa.net](http://www.bcpa.net)
- Owner's Authorization Affidavit: If owned by a corporation an authorized agent registered with the State of Florida as listed on [www.sunbiz.org](http://www.sunbiz.org) must be the person that signs and the record from [www.sunbiz.org](http://www.sunbiz.org) must be provided. If the person signing is not listed as an authorized signatory, then a corporate resolution showing that person is authorized to sign on behalf of the corporation may be provided.
- Survey: Signed and sealed Boundary Survey meeting the technical standards of the Florida Department of Professional Regulation, Board of Land Surveyors, no older than five (5) years, in pdf format that is a minimum 300 dpi that shows the following:
  1. The location of all existing structures, paved areas, and recorded easements on the property.
  2. Existing roadway details adjacent to the property including, but not limited to, rights-of-way, pavement widths, lane widths, markings, sidewalks, driveways (curb cuts), curbs and gutters, turn lanes, bus bays, medians, median openings, traffic signals and signal equipment, street lights, pull boxes, utility poles and utility equipment, drainage structures, and fire hydrants.
- Plan or Documents: A justification statement, any documents or plans involved with the request. Site Plans and / or plans must be clearly drawn dimensioned plan at a minimum scale of 1:20 that illustrates the layout of the property maximum page size of 24" x 36" in pdf format that is a minimum 300 dpi. Hand drawings can only be accepted if they are professionally drafted.
- Concurrency Analysis: A document that provides all of the application requirements for concurrency determination stated in [Chapter 31](#) of the Code of Ordinances of the City of Margate in pdf format that is a minimum 300 dpi.



- SCAD Letter:** If an application has a residential component, a Public School Impact Application (PSIA) must be submitted to the School Board. Within 45 days of accepting the PSIA, the School Board will issue a School Capacity Availability Determination (SCAD) letter confirming if the project is exempt, vested or if student capacity is available. Provide an electronic copy in pdf format that is a minimum of 300 dpi.
- Traffic Impact Statement:** Any application for a development which generates 500 or more trips per day shall include a Traffic Impact Statement that is prepared by a professional engineer licensed in the State of Florida. The Traffic Impact Statement shall assess the impact of the proposed development on all public streets and intersections within a one-mile radius of the perimeter of the development. The document is to be in pdf format that is a minimum 300 dpi.

## AFTER SUBMISSION

- Public Hearing Notices:** At least 14 days prior to a scheduled hearing, the applicant is responsible for mailing public notice to all property owners within 1,500 feet and posting public hearing signs on the property. (see Public Hearing Notice requirements for details)
- Proof of mailing and an affidavit:** Evidence the mailing took place including postage receipts, sample letter and an affidavit attesting to the information must be submitted a minimum of 10 days prior to the scheduled hearing.
- Newspaper Advertisement:** The applicant must reimburse the City for the cost of placing the required advertisement of the hearing in the newspaper.



## REZONING APPLICATION

Subject Property Address: \_\_\_\_\_

Subject Folio Number(s): \_\_\_\_\_

Description of Request:

### AUTHORIZED AGENT INFORMATION

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### APPLICANT INFORMATION (IF DIFFERENT THAN THE PROPERTY OWNER)

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### PROPERTY OWNER INFORMATION

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_



## OWNER'S AUTHORIZATION AFFIDAVIT

I hereby certify that I am the owner or authorized signatory of the property located at

\_\_\_\_\_

being the subject property for this Rezoning application, and I hereby grant authorization to

\_\_\_\_\_ to file an application with the City of Margate for approval of the same.

\_\_\_\_\_  
Print owner's or authorized signatory name

\_\_\_\_\_  
Signature of owner or authorized signatory

Owner/Agent Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Owner/Agent Address: \_\_\_\_\_

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

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this \_\_\_ day of \_\_\_\_\_, \_\_\_\_ (year), by \_\_\_\_\_ (print name of person making statement).

\_\_\_\_\_  
(Signature of Notary Public - State of Florida)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR  Produced Identification

Type of Identification Produced: \_\_\_\_\_



## PUBLIC HEARING SIGN AGREEMENT

Subject Property Address: \_\_\_\_\_

Subject Folio Number(s): \_\_\_\_\_

Pursuant to the requirements set forth in §31-55 of the Code of the City of Margate, Florida, the applicants(s) for the public hearing for the application described above do(es) hereby agree that failure to remove the sign(s) within two (2) business days following a final determination in the matter will result in the forfeiture of the \$150 collected by the City of Margate.

\_\_\_\_\_  
Print applicant's name

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Print applicant's title

\_\_\_\_\_  
Print applicant's organization/company

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

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this \_\_\_ day of \_\_\_\_\_, \_\_\_\_ (year), by \_\_\_\_\_ (print name of person making statement).

\_\_\_\_\_  
(Signature of Notary Public - State of Florida)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR  Produced Identification

Type of Identification Produced \_\_\_\_\_



## REZONING APPLICATION PROCESS

- Minimum 90 day process
- All timeframes are approximate and dependent on the meeting schedule
- No waiver of F.S. 166.033 will impact timeline

