

**Application for Site Plan Review**  
**PLANNING AND ZONING DEPARTMENT**  
**TOWN OF LAKE PLACID ! LAKE PLACID, FLORIDA**

Date Received \_\_\_\_\_

SEC. \_\_\_\_\_ TWP. \_\_\_\_\_ RGE. \_\_\_\_\_ AMOUNT FEE \$500.00 RECEIPT# \_\_\_\_\_

This application, with all required supplemental data and information, must be completed in accordance with the specific instructions in the application and returned to the Town of Lake Placid Planning and Zoning Department before the same will be advertised for hearing. **IMPORTANT.** The applicant, or his representative, must be present at the hearing.

1. Name of Applicant (Current Property Owner) PRINT:

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

2. Mailing Address \_\_\_\_\_

\_\_\_\_\_

Telephone No. \_\_\_\_\_

3. Name of Agent (if other than property owner) (Applicant must be signed by property owner or/and **AFFIDAVIT** from property owner must accompany application, including the legal description and giving agent authority to represent this applicant; and **ALSO** agent.)

4. Mailing Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

5. **LEGAL DESCRIPTION OF PROPERTY COVERED BY APPLICATION:** (If subdivided, lot block complete name of subdivision, plat book, page number, section, township and range.) (If metes and bounds description, complete description, including section, township and range.) If more than one zone classification requested, the legal description of each area covered by a separate classification.

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

6. Street Boundaries \_\_\_\_\_

7. Size of Property (width) \_\_\_\_\_ ft. x (depth) \_\_\_\_\_ Street frontage \_\_\_\_\_

8. Date SUBJECT property acquired \_\_\_\_\_

9. Current Use of Property: \_\_\_\_\_

\_\_\_\_\_

10. Is this hearing being requested as a result of a violation notice? \_\_\_\_\_

If so, what type? \_\_\_\_\_

11. Proposed date to begin development? \_\_\_\_\_
12. Is this property under contract to sell? \_\_\_\_\_
13. Was a site plan conference held with all involved town departments prior to filing this application? \_\_\_\_\_ Results \_\_\_\_\_
14. Has a public hearing been held on this property within the last 6 months? \_\_\_\_\_  
If so, in whose name? \_\_\_\_\_
15. Are there any existing structures on the property? \_\_\_\_\_ If so, what type (CBS, Frame, Frame-Stucco, Other) \_\_\_\_\_

If so, show size, location, set-backs and distance between buildings on plot plan, and submit photos showing front and side elevations of buildings.

16. All data and exhibits submitted in connection with this application become a PERMANENT PART OF THE PUBLIC RECORDS OF THE TOWN OF LAKE PLACID. The following enclosures **MUST BE ATTACHED IF APPLICABLE**, to complete application for site plan review, and must be of a size that will conveniently fold into a legal size 82 x 14 inch folder.

- A. **WAIVERS OF OBJECTION:** (Optional)
- B. DEVELOPMENT OF SITE PLAN.  
Elements of site plan:
  - 1) Services:  
Utilities \_\_\_\_\_ Parking \_\_\_\_\_ Ingress/ Egress \_\_\_\_\_
  - 2) Buffers as required width \_\_\_\_\_ height \_\_\_\_\_ stories \_\_\_\_\_
  - 3) Total square feet of building \_\_\_\_\_ height \_\_\_\_\_ stories \_\_\_\_\_
- C. Location map.
- D. Copy of survey by registered land surveyor.
- E. If EXCAVATING Involved, Profiles and Topographical Plan or sketch of the proposed excavation and perimeters.
- F. DEDICATIONS: Show all dedications or easements within or abutting property which is subject of application.
- G. List of all current property owners within 500 ft. radius of property covered in application. (With name, mailing address and legal description of their properties.) Minimum 6 names.

It is important that this application be filled out properly. It is suggested that if convenient, the applicant personally bring the application to the Zoning Office where it can be checked by a member of the staff before filing. The Department accepts no responsibility for the completeness and accuracy of the application, and will not advertise an incomplete or inaccurate application.

---

Applicant Signature

Date