

**SUBSTANDARD ROAD REVIEW APPLICATION**

**Application No. \_\_\_\_\_ (County Will Assign No.)**

Date of Application: \_\_\_\_\_

It shall be the responsibility of the petitioner, or his/her legal agent of record, to provide all the information required below or any other information which is reasonable and relevant to the formulation of a recommendation to the request being considered.

**This application shall not be deemed complete until all required information is provided.**

**Owner's Name(s):** \_\_\_\_\_

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

City: \_\_\_\_\_, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

**Agent's Name:** \_\_\_\_\_

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

City: \_\_\_\_\_, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

**Transportation Consultant's Name:** \_\_\_\_\_

Contact Person: \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

Contact Person's E-mail: \_\_\_\_\_

Parcel Description (Subdivision Name, if applicable): \_\_\_\_\_  
\_\_\_\_\_

Parcel ID No(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Attach the following items to this application** (if **ALL** items are not received, the application will be deemed incomplete and the package will be returned):

- Location map.
- Concept plan showing proposed access points to property and surrounding roadway network.
- Notarized Agent of Record Letter, if applicable (see attached).
- \$100.00 Review Fee.

Please check the type of application being requested:

<b>SUBSTANDARD ROAD APPLICATION REQUIRED FOR:</b>	<b>New Plan</b>	<b>Substantial Amendment of Previously Approved</b>
DRI	_____	_____
MPUD	_____	_____
Conditional Use	_____	_____
Special Exception	_____	_____
Euclidean Rezoning	_____	_____
Preliminary Site Plan	_____	_____
Preliminary Development	_____	_____
Plan Right-of-Way Use Permit	_____	_____
Operating Permits	_____	_____

**This Application is only required for the above listed application types.**

*NOTE: Initial County staff receipt or acceptance of this application to determine exemption shall not be deemed a final determination by the County. At any time up to and including final approval of the development by the DRC or Board of County Commissioners, the County may determine that a substandard road analysis is required; and such determination shall require payment of the applicable fees. Accordingly, the applicant should provide accurate information to help avoid delays in the review process.*

**The owner/agent will be responsible for additional fees for appeals and other services.**

\_\_\_\_\_  
OWNER'S/REPRESENTATIVE'S SIGNATURE

\_\_\_\_\_  
OWNER'S/REPRESENTATIVE'S NAME (PLEASE PRINT)

**OFFICIAL USE ONLY**

Application Name and No. \_\_\_\_\_

Application Received Date: \_\_\_\_\_ Application Accepted Date: \_\_\_\_\_

Application Rejected Date: \_\_\_\_\_ Application Returned to: \_\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_  
Review Consultant: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

Comments:

## QUESTIONNAIRE – SUBSTANDARD ROADS

**NOTE: If the question does not apply, state N/A.**

1. Has a Substandard Road Review been conducted previously? If yes, then please provide supporting documentation.
  
2. Is this development contiguous or nearby (within one-quarter mile) of another development, parcel of land, lot, or tract that is developed by the same or a related development or landowner?
  
3. Is this development part of the same zoning plan, preliminary plan/preliminary site plan, plat, or other unified or common plan of development (refer to Land Development Code, Section 901.4). If yes, answer Question No. 4.
  
4. Was any portion or all of the parcels of land, lots, or tracts legally subdivided? If yes, provide parcel identification number(s).
  
5. Total proposed development entitlements; i.e., number of residential units, square footage of commercial, number of rooms for lodging, etc. Refer to the attached Exhibits A for description of land uses. If the answer to Question No. 2 or Question No. 3 above is yes, provide the total of all developments, including already built or approved portions in addition to the proposed development submitted as part of this application, but exclude any parcels identified in Question No. 4 above.
  
6. Are the proposed entitlements of all development at or above the size of de minimus development as shown on Exhibit A (see attached)?
  
7. Has a transportation analysis/Timing & Phasing analysis being approved for this project or is such an analysis being prepared concurrently? If yes, please provide a copy of the analysis and any associated conditions of approval.

**NOTE: The applicant(s) shall ensure that their consultant does not prepare a substandard road review without an approved methodology statement signed by the County and/or appropriate County consultant.**

Use this space for any additional information:

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## EXHIBIT A SIZE OF DEVELOPMENT THAT GENERATES 100 DAILY DRIVEWAY TRIPS

Land Use	Trip Rate (1)	Size of Dev.	Unit
<b>RESIDENTIAL:</b>			
Single-Family (Detached)	7.59	14	DU
Multifamily (Apartments)	6.59	16	DU
Mobile Home Park	4.17	22	DU
Age-Restricted Single-Family	3.13	27	DU
Congregate-Care Facility (Attached)	2.25	45	DU
Low-Rise Condominium (1 to 2 stories)/Townhouse	5.20	20	DU
High-Rise Condominium (3 or more stories)	4.18	24	DU

<b>LODGING:</b>			
Hotel	8.30	13	Room
Motel	5.63	18	Room
Resort Hotel	5.10	20	Room
Recreational Vehicle Park	2.22	28	RV Space

<b>RECREATION:</b>			
Marina	2.96	34	Berth
Golf Course	35.74	3	Hole
Miniature Golf Course	3.30	31	Hole
Movie Theaters	106.63	1	Screen
General Recreation	2.28	44	Acres
Racquet Club/Health Club/Spa/Dance Studio	14.03	8	1,000 SF
Bowling Alley	33.33	4	1,000 SF
Community Center	22.88	5	1,000 SF

<b>INSTITUTIONAL:</b>			
Hospital	16.50	6	1,000 SF
Nursing Home	2.48	41	Bed
Elementary School	1.29	78	Student
Middle School	1.62	62	Student
High School	1.71	59	Student
Junior/Community College	2.00	84	Student
University	1.50	43	Student
Church	9.11	11	1,000 SF
Day Care	3.03	34	Student
Cemetery	4.73	22	Acres

<b>OFFICE:</b>			
General Office - 50,000 SF or less	15.65	7	1,000 SF
General Office - 50,001 to 100,000 SF	13.34	All	1,000 SF
General Office - 100,001 to 200,000 SF	11.37	All	1,000 SF
General Office - 200,001 to 400,000 SF	9.70	All	1,000 SF

Land Use	Trip Rate (1)	Size of Dev.	Unit
<b>OFFICE (cont.):</b>			
General Office - Greater than 400,000 SF	8.83	All	1,000 SF
Medical Office	35.95	3	1,000 SF
Office Park	11.42	9	1,000 SF
Veterinarian Clinic	32.80	4	1,000 SF

<b>RETAIL:</b>			
Specialty Retail	49.99	3	1,000 SF
Shopping Center - Under 50,000 GSF	86.56	2	1,000 SF
Shopping Center - 50,000 to 200,000 GSF	53.28	All	1,000 SF
Shopping Center - 200,001 to 400,000 GSF	41.80	All	1,000 SF
Shopping Center - 400,001 to 600,000 GSF	36.27	All	1,000 SF
Shopping Center - 600,001 to 800,000 GSF	32.80	All	1,000 SF
Shopping Center - Greater than 800,000 GSF	30.33	All	1,000 SF
Pharmacy/Drug Store with Drive-Through	92.88	2	1,000 SF
Home Improvement Superstore	29.80	4	1,000 SF
Hardware/Paint	51.29	2	1,000 SF
Quality Restaurant	91.10	2	1,000 SF
High-Turnover Restaurant	126.50	1	1,000 SF
Fast Food Restaurant with Drive-Through	522.62	All	1,000 SF
Gasoline Station	168.56	1	Fuel POS
Quick-Lube	40.00	3	Bays
Auto Repair or Body Shop	34.12	4	1,000 SF
Self-Service Car Wash	108.00	1	Bay
Tire Store	24.87	5	1,000 SF
New/Used Auto Sales	29.85	4	1,000 SF
Supermarket	103.38	1	1,000 SF
Convenience Store with Gas Pumps	775.14	All	1,000 SF
Furniture Store	5.06	20	1,000 SF
Bank/Savings Drive-In	159.34	All	1,000 SF
Convenience/Gasoline/Fast-Food Store	984.59	All	1,000 SF

<b>INDUSTRY:</b>			
General Light Industrial	6.97	15	1,000 SF
General Heavy Industrial	1.50	67	1,000 SF
Industrial Park	6.96	15	1,000 SF
Manufacturing	3.82	27	1,000 SF
Warehouse	3.56	21	1,000 SF
Miniwarehouse	2.50	41	1,000 SF
High-Cube Warehouse	1.44	84	1,000 SF
Airport Hangar	3.56	21	1,000 SF

**NOTE:** For land uses not listed herein, either the *ITE Trip Generation Handbook*, latest edition, or other trip-generation studies as approved by the County shall be used.

## SUBSTANDARD ROAD ANALYSIS FEE SCHEDULE

Application Review	\$100
Includes review of submitted application and processing.	
Sub threshold Substandard analysis In-House	\$1,000
Includes determination of cost, fair share calculation, field visit to the site, review of trip generation, and documentation of analysis.	
Substandard Road Review In-House	\$1,500
Includes review of substandard roadway methodology statement and analysis, contacting the County Engineer to request information regarding known deficient conditions in the area, undertaking a field visit to gather data and review the impacted road network, documenting the analysis, and preparing a letter/report summarizing the findings.	
Substandard Road Review by Consultant (Consistent with existing TIS fees)	\$2,052
(\$1,784+15% County Administrative Fee) Includes review of substandard roadway methodology statement and analysis, contacting the County Engineer to request information regarding known deficient conditions in the area, undertaking a field visit to gather data and review the impacted road network, documenting the analysis, and preparing a letter/report summarizing the findings.	
Each meeting, if requested by the Applicant	\$250

**AGENT OF RECORD LETTER  
(INDIVIDUAL)**

TO THE PASCO COUNTY GROWTH MANAGEMENT DEPARTMENT AND THE PASCO COUNTY BOARD OF COUNTY COMMISSIONERS:

I/we, \_\_\_\_\_, hereby designate and appoint \_\_\_\_\_ as my Agent of Record for the purpose of representing me during the Transportation Impact Study application process.

My Agent of Record is hereby vested with authority to make any representations, agreements, or promises which are necessary or desirable in conjunction with the process. My Agent of Record is also authorized to accept or reject any conditions imposed by any reviewing board or entity.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
APPLICANT'S/OWNER'S SIGNATURE

\_\_\_\_\_  
APPLICANT'S REPRESENTATIVE SIGNATURE

\_\_\_\_\_  
PRINTED NAME OF APPLICANT/OWNER

\_\_\_\_\_  
PRINTED NAME OF REPRESENTATIVE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY, STATE, ZIP CODE

\_\_\_\_\_  
TELEPHONE NUMBER

STATE OF FLORIDA  
COUNTY OF PASCO

The foregoing \_\_\_\_\_ (type of document), dated \_\_\_\_\_, \_\_\_\_\_, was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_ is personally known to me or who has produced \_\_\_\_\_ (insert type of identification) as identification.

Seal:

\_\_\_\_\_  
NOTARY PUBLIC OF THE STATE OF FLORIDA

\_\_\_\_\_  
Printed Name

My Commission Expires:

**NOTE:** If an Agent of Record is to be designated, all property owners of the subject property must sign this form.

**AGENT OF RECORD LETTER  
(CORPORATION)**

TO THE PASCO COUNTY GROWTH MANAGEMENT DEPARTMENT AND THE PASCO COUNTY BOARD OF COUNTY COMMISSIONERS:

I/we, \_\_\_\_\_, hereby designate and appoint \_\_\_\_\_ as my/our Agent of Record for the purpose of representing me/us during the Transportation Impact Study application process.

My/our Agent of Record is hereby vested with authority to make any representations, agreements, or promises which are necessary or desirable in conjunction with the process. My/Our Agent of Record is also authorized to accept or reject any conditions imposed by any reviewing board or entity.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
APPLICANT(S)/OWNER(S) SIGNATURE

\_\_\_\_\_  
APPLICANT(S)/OWNER(S) SIGNATURE

\_\_\_\_\_  
PRINTED NAME OF APPLICANT(S)/OWNER(S)

\_\_\_\_\_  
PRINTED NAME OF APPLICANT(S)/OWNER(S)

\_\_\_\_\_  
APPLICANT(S) REPRESENTATIVE SIGNATURE

\_\_\_\_\_  
PRINTED NAME OF REPRESENTATIVE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY, STATE, ZIP CODE

\_\_\_\_\_  
TELEPHONE NUMBER

STATE OF FLORIDA  
COUNTY OF PASCO

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_ (name of officer or agent, title of officer or agent acknowledging) of \_\_\_\_\_ (corporation, limited partnership, etc.) on behalf of the corporation. He/she is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

Seal:

\_\_\_\_\_  
NOTARY

**NOTE:** If an Agent of Record is to be designated, all property owners of the subject property must sign this form.