

## **REZONING APPLICATION**

A completed application for \*Timing & Phasing, Substandard Road Review (LDC 901.2), and Waiver Request must be submitted to the Planning & Development Transportation Planner and evaluated **prior** to any rezoning application submittal to the Current Planning/Zoning.

No rezoning application will be accepted without a written, County-approved Timing & Phasing and/or Substandard Road Analysis or written, County-approved exemption letter.

The written, County-approved analysis or exemption letter from the Current Planning Division Transportation Planner **must** be attached and submitted with your rezoning application.

Please call Current Planning/Intake to schedule a content meeting for submittal at 727-847-8142.

If you have any questions or need further assistance, please contact the Current Planning/Zoning at (727) 847-8142, New Port Richey; (352) 523-2411, Ext. 4701, Dade City; or (813) 996-2411, Land O' Lakes.

\*A Timing & Phasing application for an MPUD Master Planned Unit Development and other rezoning types can be obtained from the Pasco County website at [www.pascocountyfl.net](http://www.pascocountyfl.net).

## **REQUIREMENTS FOR PUBLIC NOTICE SHALL APPLY TO ALL**

## **REZONINGS, CONDITIONAL USES, & SPECIAL EXCEPTIONS.**

The applicant/representative is responsible to provide public notice for all rezoning, conditional use, and special exception applications. Public notice consists of a written notice letter sent via United States Post Office to all property owners within 500-feet\* of the subject property and posting a Public Notice/Public Hearing sign on the subject property at least 13 days prior to the hearing(s); and, providing a notarized affidavit attesting to providing public notice at least 10 days prior to the public hearing(s). Depending on the type and scope of the application, a Neighborhood Meeting may be required. After submitting your application, Pasco County will provide additional instructions, sample forms for written notice and affidavit, and a mailing list of property owners within 500-feet\* of the subject property. Specialized public notice sign is available from Planning and Development Department for a nominal fee. Pasco County will publish a public notice in a newspaper of general circulation at least 13 days prior to the hearing(s).

\*SOME AREAS MAY REQUIRE 1000 FEET TO BE DETERMINED BY STAFF.

I prefer to receive correspondence pertaining to the application via EMAIL ADDRESS:

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# APPLICATION FOR ZONING AMENDMENT PASCO COUNTY, FLORIDA APPLICATION NO. \_\_\_\_\_

The undersigned owner(s) of the following legally described property has formally requested consideration of a zoning amendment in accordance with provisions of Florida Statutes and Section 402.1 and 402.2 of the Pasco County Land Development Code.

It shall be the responsibility of the petitioner, or her/his legal agent of record, to provide all information required below or any other information which is reasonable and relevant to the formulation of a recommendation to the zoning amendment being considered.  
**No application for review shall be deemed complete until all required information is provided.**

1. Name of Current Owner(s): \_\_\_\_\_
2. Owner's Mailing Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
3. Owner's Telephone Number: \_\_\_\_\_
4. Parcel ID No.: \_\_\_\_\_
5. Present Zoning District: \_\_\_\_\_ Proposed Zoning District: \_\_\_\_\_
6. Existing Use: \_\_\_\_\_
7. **Proposed Use/Development:** \_\_\_\_\_
8. **A. Two signed and sealed boundary legal descriptions and sketches or property survey (by a registered surveyor), including wetland (if any) delineation, to be supplied at time of application.**  
**B. A Timing & Phasing application must be submitted to the Planning & Development Department prior to submission of this application. No application will be accepted without a written County-approved analysis study or County-approved exemption (see cover sheet). A County-approved methodology statement for MPUD applications only will be accepted.**
9. Copy of Warranty Deed \_\_\_\_\_
10. \_\_\_\_\_ Copy of Last Year's Tax Bill \_\_\_\_\_ 10a. Notarized Agent of Record (if applicable) \_\_\_\_\_
11. All **MPUDs must** be submitted at an **application submittal meeting** with a planner. Two original applications (unbound).
12. Site Plan for MPUD Amendments (5 full size plus two 8½" X 14" copies of plan), CD and Narrative \_\_\_\_\_.
13. Is this application the result of a Notice of Violation? \_\_\_\_\_ If so, please attach a copy of this letter.
14. **Fees:** Please make checks payable to Pasco County Board of County Commissioners.

|      | Euclidian Rezoning                                   | MPUD   |
|------|--|--|
| #107 | Base Fee <b>\$850.00</b><br>Per Acre <b>\$ 20.00</b> | Base Fee <b>\$8,000.00</b><br>Per Acre <b>\$20.00</b>  |
| #269 | Technology Fee <b>\$ 25.00</b>                       | <b>(Maximum Fee \$25,000)</b>  |
| #154 | Environmental Review Fee <b>\$100.00</b>             | Technology Fee <b>\$25.00</b>  |
| #    | Advertising Fee <b>\$ 60.00</b>                      | Environmental Review Fee <b>\$750.00 plus</b>  |
| #215 | <b>Public Hearing Sign \$ 12.75</b>                  | <b>\$1/acre (Max total \$1,750.00)</b>   |
| #215 | <b>Public Hearing Stakes \$ 1.36</b>                 | <b>MPUD Substantial Modification:</b>  |
| #109 | <b>Timing &amp; Phasing Application \$500.00</b>     | Base Fee <b>\$6,000.00</b><br>Per Acre <b>\$20.00</b>  |
|      |  | <b>(Maximum Fee \$25,000)</b>  |
|      |  | Technology Fee <b>\$25.00</b><br>Environmental Review Fee <b>\$750.00 plus</b><br><b>\$1/acre (Max total \$1,750.00)</b> |
|      |  | <b>MPUD Non-substantial Modification:</b>  |
|      |  | Base Fee <b>\$3,000.00</b><br>Technology Fee <b>\$25.00</b><br>Environmental Review Fee <b>\$750.00</b>                  |

The petitioner acknowledges that all zoning amendments are subject to all other applicable sections of the Pasco County Land Dev. Code  
**\*\* A CONTINUANCE MAYBE GRANTED IF THE REQUEST IS RECEIVED, IN WRITING, BY THIS OFFICE WITH CAUSE SHOWN A MINIMUM OF FIVE (5) DAYS BEFORE ANY MEETING.\*\* A \$300.00 CONTINUANCE FEE MAY APPLY.**

Date: \_\_\_\_\_

Fee Calculation: \_\_\_\_\_ Check Number: \_\_\_\_\_

Accepted By: \_\_\_\_\_

Applicant E-Mail Address: \_\_\_\_\_

Owner's/Representative's Signature \_\_\_\_\_

Owner's/Representative's Name (Print) \_\_\_\_\_

Representative's Address \_\_\_\_\_

Representative's City, State, Zip Code \_\_\_\_\_

Representative's Telephone Number \_\_\_\_\_

**\*\*ANY PROPOSED CHANGES TO CONDITIONS OF REZONING MUST BE IN WRITING AND DISTRIBUTED TO STAFF AT LEAST THREE (3) BUSINESS DAYS PRIOR TO THE MEETING. FAILURE TO DO SO WILL RESULT IN A CONTINUANCE.**

# AGENT OF RECORD LETTER

TO THE PASCO COUNTY PLANNING AND DEVELOPMENT DEPARTMENT, THE PASCO COUNTY PLANNING COMMISSION, AND THE PASCO COUNTY BOARD OF COUNTY COMMISSIONERS:

I (We), \_\_\_\_\_, hereby designate and appoint \_\_\_\_\_ as my (our) Agent of Record for the purposes of representing me (us) during the rezoning, special exception, conditional use, variance, appeal or site development application and applicable public hearing for application/project application and public hearing processes.

My (our) Agent of Record is hereby vested with authority to make any representations, agreements, or promises which are necessary in conjunction with the said application/project. 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/OWNER

\_\_\_\_\_  
APPLICANT/OWNER

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

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

\_\_\_\_\_  
EMAIL OWNER

\_\_\_\_\_  
APPLICANT'S(S) REPRESENTATIVE

\_\_\_\_\_  
EMAIL REPRESENTATIVE

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

\_\_\_\_\_  
REPRESENTATIVE'S ADDRESS

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

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

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

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 2020 by \_\_\_\_\_ (name of person acknowledging), who is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
NOTARY PUBLIC  
State of Florida at Large

My Commission Expires:

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