CITY OF TARPON SPRINGS, FLORIDA Conditional Use Application

Return to: Planning & Zoning Division 324 E. Pine Street Tarpon Springs, FL 34689 (727) 942-5611

(Please type or print clearly)

Property Owner(s)								
Name				Email				
Address								
City		State				Zip		
Phone	Fax		Cellular		r			
Applicant								
Name			Email					
Address								
City	Si		State			Zip		
Phone	Fax			Cellular				
Agent (if applicable)	1							
Name				Email				
Address								
City		State		Zip				
Phone	Fax				Cellular			
General Information								
Property Location or Address								
Legal Description (attach additional sheets as necessary)								
Tax Parcel Number(s)								
Current Use of Property								
Conditional Use Requested								
Present City of Tarpon Springs Designations			Land Use Category			Zoning District		

IMPORTANT NOTE: In connection with the approval of any Conditional Use, the Board of Commissioners may make the approval subject to conditions, stipulations and/or safeguards as it deems necessary to ensure compliance with the provisions of the Land Development Code (LDC) and/or Comprehensive Plan. Failure to comply with the approval conditions shall be deemed a violation of the LDC and be enforced as such.

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The following MUST be furnished with this application: [incomplete applications will not be accepted]
☐ Completed original application
■ \$500.00 application fee
■ Survey, signed and sealed by a professional land surveyor
■ Legal description of the property
☐ Proof of ownership (a copy of the deed which conveyed title to the present owner of the property)
■ Written description of proposed use
☐ Site plan, as applicable
■ A copy of the completed DBPR Division of Alcoholic Beverages and Tobacco application if requesting a beer, wine and/or liquor license
■ A detailed floor plan and preliminary report from State/County oversight agency if requesting an ACLF/ALF
☐ If applying to establish a Nonconforming Lot pursuant to Section 209.02, LDC the applicant must also submi an architectural elevation and a complete site plan that meets the requirements of Section 210.00, LDC et seq.
■ Mailing labels for public notices and applicable postage charges. (City staff will prepare the labels and calculate postage charges when a complete application is submitted.)

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AFFIDAVIT

I (we), the undersigned, certify ownership of	of the property	y within this application, that	said ownership		
has been fully divulged, whether such owner	ership by con	tingent or absolute, and that	the name of all		
parties to an existing contract for sale or any	options are f	iled with this application.			
I (we) certify that	are) duly designated as the agent(s) for the				
owner, that the agent(s) is (are) authorized	to provide	subject matter on the applica	ation contained		
herein, whether verbal or written, and appea	r at any publi	c hearing(s) involving this peti	ition.		
I (we) assent to the City's Comprehensive F	Plan as it app∣	lies to the property. Further,	it is understood		
that this application must be complete and a	ccurate and t	he appropriate fee paid prior t	o processing.		
Date:	Title Holder: _		<u></u>		
te: Title Holder:					
Date:					
Date:	Title Holder: _				
STATE OF FLORIDA)					
COUNTY OF PINELLAS)					
The foregoing instrument was acknowledged bef	ore me this	day of	_, A.D., 20		
by			no has produced		
as identific					
	NOTARY PUE	BLIC			
	Name:				
	Signature:				
	Stamp:				

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