

**HENDRY COUNTY PLANNING AND ZONING DEPARTMENT**

P.O. Box 2340  
LaBelle, Florida 33975-2340  
863-675-5240 • FAX: 863-674-4194

<i>For Office Use Only:</i>	
Hearing No.:	_____
Date Received:	_____
Fees:	_____
Check No.:	_____ or Cash _____

**PRELIMINARY SUBDIVISION PLAT REVIEW APPLICATION**

NOTE: The application for preliminary plat approval shall include changes and considerations as may have been pointed out in the pre-application review. The preliminary plat must be prepared by a professional land surveyor registered in the state, and in conformity with this Code, as specified in Section 1-54-8.

Name of Applicant: \_\_\_\_\_

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

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ e-mail: \_\_\_\_\_

Name of Agent: \_\_\_\_\_

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

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ e-mail: \_\_\_\_\_

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

Property Strap Number(s) : \_\_\_\_\_

Property Acreage: \_\_\_\_\_

Future Land Use Designation: \_\_\_\_\_ Zoning Designation: \_\_\_\_\_

Adjacent Zoning: North: \_\_\_\_\_ South: \_\_\_\_\_ East: \_\_\_\_\_ West: \_\_\_\_\_

Legal Description of Property (Lengthy Description May Be Attached): \_\_\_\_\_

All data and exhibits submitted in support of this application shall become a permanent part of the Public Records of Hendry County, Florida.

**SUBMITTAL REQUIREMENTS:**

1. *Data on natural features.* Complete topographic data depicting all physical characteristics together with all easements, rights-of-way and boundary lines of record. Topographic data shall include sufficient area immediately adjacent to the area under consideration that may influence the design and geometrics of same, i.e., zoning, owners of record, existing subdivision, except when otherwise specified by the planning director.
2. *Preliminary plat.* Preliminary plat shall be prepared by a Florida registered land surveyor at a scale where one inch denotes no more than 400 feet. It shall reflect all existing conditions required in item #1 above and the following:
  - a. Streets: Names, rights-of-way and pavement widths.
  - b. Other rights-of-way or easements: Location, width, and purpose.
  - c. Location of utilities, if not shown on other exhibits.
  - d. Lot lines.

- e. Sites, if any, for multifamily dwellings, shopping centers, churches, industry or other uses exclusive of single-family dwellings.
  - f. Sites, if any, to be reserved or dedicated for parks, playgrounds, or other public uses.
  - g. Site data, including number of residential lots, typical lot size, and acres in parks, etc.
  - h. Title, scale, north arrow, date, datum, boundary marks and notations stating acreage.
  - i. Location map, showing location of proposed development (provide electronic version for advertising).
  - j. Proposed public improvements.
  - k. Title and certificates, present tract designation, title of proposed subdivision, name and address of owners, and certification of the Florida registered land surveyor.
  - l. Completed subdivision analysis form as required by the health department.
  - m. The plat sheets shall be 22 inches by 30 inches and shall be at a scale where one inch denotes no more than 400 feet, except that a scale of one inch equals not more than 400 feet shall be permitted when all lots or parcels within the plat are one-half acre or more in size.
3. *Master plan.* Whenever the subdivision is proposed in more than one or more units or phases, a master plan of the entire subdivision shall be included which delineates the phases or stages of development with an estimated timetable for completion of each phase of the subdivision.
  4. *Draft of protective covenants.* The subdivider shall provide a draft of protective covenants whenever the subdivider proposes to regulate land use in the subdivision and otherwise protect the proposed development.
  5. A copy of the pre-plat Review meeting notes.
  6. Any additional data, materials or information deemed necessary by the County to make a determination.
  7. One copy of the **approved** preliminary plat must be submitted to the Planning and Zoning Department electronically. Approval of the preliminary plat shall be good for a period of three years.
  8. Processing fee payable to the Hendry County Board of County Commissioners:
    - \$4,000.00 plus \$20.00 per acre
    - Additional review fees-*
    - 2<sup>nd</sup> review of documents by staff \$250.00
    - 3<sup>rd</sup> review of documents by staff \$500.00
    - 4<sup>th</sup> review of documents by staff \$750.00
    - 5<sup>th</sup> review of documents by staff and beyond \$1000.00
    - Advertising charges will be invoiced prior to public hearings*

**Please submit original application plus supporting documentation for sufficiency review. Once the application has been deemed sufficient, please submit 5 copies of all documents for formal review. The Local Planning Agency public hearing will require 9 copies.**

LETTER OF AUTHORIZATION

ATTEST:

We/I, \_\_\_\_\_, being first duly sworn, depose and say that we/I am/are the owners of the property described herein and which is the subject matter of the proposed hearing; that all the answers to the questions in this application, including the disclosure of interest information, all sketches, data, and other supplementary matter attached to and made a part of this application, are honest and true to the best of our knowledge and belief. We/I understand that the information requested on this application must be complete and accurate and that the content of this form, whether computer generated or County printed shall not be altered.

As property owner We/I further authorize \_\_\_\_\_ to act as our/my representative in any matters regarding this Petition.

\_\_\_\_\_  
(Signature of Property Owner)

\_\_\_\_\_  
(Signature of Property Owner)

\_\_\_\_\_  
(Typed or Printed Name of Owner)

\_\_\_\_\_  
(Typed or Printed Name of Owner)

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification.

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

\_\_\_\_\_  
State of Florida  
County of Hendry

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