

PLANNING & ZONING ADJUSTMENT BOARD

COMMERCIAL DEVELOPMENT APPLICATION CHECKLIST

- Application
- Boundary Survey (If not located in a Flood Zone) / Topographical Survey (If located in a Flood Zone)
- Site Plan (Site plan must depict proposed project and distance from each setback)
- DEP Stormwater Permit/Exemption (site plan must show stormwater plan, if applicable)
- Parking Plan

DISCLOSURE AGREEMENT

I understand that this is not a permit application and will still need to submit a permit application to the Building Department after my application is approved.

I also understand that any major site plan changes I make after approval will result in resubmittal and reapproval by the Planning & Zoning Adjustment Board and the Franklin County Board of County Commission.

I _____, understand and agree to the statements listed above.

_____/_____
Signature Date



PLANNING & ZONING ADJUSTMENT BOARD APPLICATION

FRANKLIN COUNTY BUILDING DEPARTMENT

34 Forbes Street, Suite 1. Apalachicola, FL 32320

PHONE: 850-653-9783 FAX: 850-653-9799

<https://www.franklincountyflorida.com/county-government/planning-building/planning-services/>

PLANNING & ZONING COMMERCIAL DEVELOPMENT APPLICATION

THIS IS NOT A PERMIT APPLICATION

After approval by the Board, you will still be required to submit a permit application to the Building Department.

Return completed application and required paperwork to the following address (see page 2 for details):

Franklin County Building Department

34 Forbes Street, Suite 1

Apalachicola, FL 32320

OR

Email to: cortnib@franklincountyflorida.com

The deadline to turn in a completed application for the Planning & Zoning Adjustment Board is always the 2nd Tuesday of each month at 12:00pm Noon (NO EXCEPTIONS)

PROPERTY OWNER'S INFORMATION

PROPERTY OWNER'S NAME: _____

MAILING ADDRESS: _____ CITY/STATE/ZIP: _____

CONTACT NUMBER: _____ EMAIL: _____

AGENT'S NAME: _____

CONTACT NUMBER: _____ EMAIL: _____

PROPERTY DESCRIPTION

911 ADDRESS: _____ CITY/STATE/ZIP: _____

LOT(S): _____ BLOCK: _____ SUBDIVISION: _____ UNIT: _____

PARCEL IDENTIFICATION NUMBER: _____

JURISDICTION

___ APALACHICOLA ___ EASTPOINT ___ ST. GEORGE ISLAND ___ CARRABELLE ___ DOG ISLAND ___

LANARK ___ ST. JAMES ___ ST. THERESA ___ ALLIGATOR POINT

PROJECT DETAILS

DESCRIPTION OF DEVELOPMENT: _____

ZONING DISTRICT: _____ TOTAL BUILDING SQ FOOT: _____ NUMBER OF STORIES: _____

TOTAL IMPERVIOUS LOT COVERAGE: _____ TOTAL PARKING SPACES: _____ FLOOD ZONE: _____

CRITICAL SHORELINE DISTRICT: Y/N _____ ELEVATION REQUIREMENT: _____

OFFICE USE ONLY

ADJUSTMENT BOARD MEETING DATE: _____ APPROVED/DENIED/TABLED: _____

BOARD OF COUNTY COMMISSION DATE: _____ APPROVED/DENIED/TABLED: _____

THIS REQUEST WILL EXPIRE ONE YEAR FROM DATE OF APPROVAL BY THE FRANKLIN COUNTY BOARD OF COUNTY COMMISSION. EXPIRATION DATE: _____