



DEPARTMENT OF DEVELOPMENT SERVICES
CITY PLANNING DIVISION

For Internal Use Only

Case _____

Date _____

Tel. (239) 574-0553

Fax (239) 574-0591

P.O. Box 150027

Cape Coral, FL 33915-0027

PLANNED DEVELOPMENT PROJECT (PDP) AMENDMENT APPLICATION

NOTE: All applications require Public Hearings before the Hearing Examiner and City Council.

Pre-Application Conference Required

A pre-application conference is required with the Development Services Department prior to submitting a PDP Amendment application.

Pre-Application Meeting Date: _____, 20____.

PDP APPLICATION REQUIREMENTS

Please check the PDP amendment(s) below that are requested:

- Amend or eliminate one or more conditions appearing in a PDP development order.
- Amend a previously approved Master Concept Plan (MCP)
- Rezone all or a portion of a PDP.
- Second request to extend the date of substantial construction or buildout period of a project.
- Request to extend the date of substantial construction after the buildout period has expired.
- Add new land into a previously approved PDP.
- Eliminate part, but not all, of the land from a previously approved PDP.

Information Required for all PDP Amendments:

- Date of pre-application meeting held with the Planning staff.
- Letter of intent (see below for additional details for each particular type of amendment)
- Legal descriptions of the PDP project and the tracts, lots, or area subject to the amendment, if applicable.

Specific Amendment Types

1. Information required to amend or eliminate one or more conditions in a PDP development order.

- Letter of intent that identifies the specific conditions in the development order proposed to be amended. The letter of intent should explain why the PDP amendment will promote the public health, safety, and welfare of the community, and is consistent with the public interest.
- A boundary survey of the site.
- A site development plan or as-built survey of the area covered by the amendment for requests involving physical changes to land in the PDP.



2. Amend a previously approved MCP.
 - A letter of intent that includes a general project description, describes the proposed change(s) to the MCP, and the reason(s) for the change(s).
 - A boundary survey of the site.
 - A legal description of the site in a WORD document.
 - A copy of the previously approved MCP.
 - A copy of the new or proposed MCP.
3. **Information required to rezone all of a portion of a PDP.**
 - Letter of intent that describes the request and identifies how the requested rezone is consistent with the six standards used for evaluating rezones appearing in LDC, 3.4.6.
 - A legal description, in a WORD document, of the PDP project area and the area proposed to be rezoned.
4. **Information required to extend the date of substantial construction or buildout period of a project for a second and subsequent time, or after the buildout period has expired. (First requests to extend the date of substantial construction or buildout period may be sought administratively and require a different application.)**
 - A letter of intent explaining why construction on the site has not occurred within the period of time required by the PDP. Such justification may include, but is not limited to the following:
 - Change of ownership of the property subsequent to the project approval.
 - A deterioration of economic conditions subsequent to project approval.
 - State or national health-related emergencies.
 - Adverse weather conditions that have impeded the physical development of the site.
 - A boundary survey of the site.
 - A legal description of the site in a WORD document.
 - A copy of the previously approved MCP.
5. **Information required to add new land into a previously approved PDP.**
 - Legal description of the previously approved PDP.
 - Legal description and survey of the land requested to be added to the PDP.
 - Letter of intent that describes the reason(s) for adding new land to the PDP project area.
6. **Information required to eliminate part, but not all, of the land from a previously approved PDP.**
 - An application signed by owners of 100% of the property governed by the PDP.
 - A letter of intent outlining the following:
 - A request to abandon the PDP and the reasons for the abandonment.



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- Acknowledge that the petitioners agree to relinquish all entitlements granted previously by the PDP, except for any rezone, vacation, variance, or subdivision approval.
- A current site plan or as-built survey showing all improvements to the project area.
- A legal description and accompanying sketch of the area proposed to be abandoned.

Note: For any PDP amendment, staff may require additional information deemed necessary to evaluate the project.

FEES: The applicant shall be responsible for all administrative review fees, advertising costs, and recording fees associated with recording documents with the Lee Clerk of Circuit Court. All advertising and recording fees are based on a cost-recovery basis.

Administrative review fees are based in part on the area of the PDP according to the schedule below:

1) PDP Amendment Fee: \$2,525.00

Additional fees are required for site over 10 acres. To calculate these additional fees, an additional \$55.00 is required for each additional acre over 10 acres with a maximum cap on fees established at \$3,915.00.

2) Fire review Fee: \$104.00

3) PDP Amendment Public Hearing Fees: \$665.00

Total fees submitted (add Categories 1-3 above): \$_____

Until these fees are paid, restrictions on the issuance of any City permits will remain on the affected property that will prevent the city from issuing any applicable building permits, site plans, certificate of use, or certificates of occupancy for any property covered by the Resolution or Ordinance.



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PLANNED DEVELOPMENT PROJECT (PDP) AMENDMENT APPLICATION

PROPERTY INFORMATION

Project Name: _____
Location/Address _____
Strap Number _____ Unit _____ Block _____ Lot (s) _____
Plat Book _____ Page _____ Future Land Use _____ Current Zoning _____

PROPERTY OWNER (S) INFORMATION

Owner _____ Address _____
Phone _____ City _____
Email _____ State _____ Zip _____
Owner _____ Address _____
Phone _____ City _____
Email _____ State _____ Zip _____

APPLICANT INFORMATION (If different from owner)

Applicant _____ Address _____
Phone _____ City _____
Email _____ State _____ Zip _____

AUTHORIZED REPRESENTATIVE INFORMATION (If Applicable)

Representative _____ Address _____
Phone _____ City _____
Email _____ State _____ Zip _____



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If the owner does not own the property in his/her personal name, the owner must sign all applicable forms in his/her corporate capacity.

(ALL SIGNATURE MUST BE NOTARIZED)

The owner of this property, or the applicant agrees to conform to all applicable laws of the City of Cape Coral and to all applicable Federal, State, and County laws and certifies that all information supplied is correct to the best of their knowledge.

CORPORATION/COMPANY NAME (IF APPLICABLE)

OWNER'S NAME (TYPE OR PRINT)

OWNER'S SIGNATURE

OWNER'S NAME (TYPE OR PRINT)

OWNER'S SIGNATURE

APPLICANT NAME (TYPE OR PRINT)

APPLICANT SIGNATURE

I have read and understand the above instructions. Hearing date(s) will be confirmed when I receive a copy of the Notice of Public Hearing stipulating the day and time of any applicable hearings.

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribe before me, by means of physical presence or online notarization, on this _____ day of _____, 20__ by _____, know is personally known to me or produced _____ as identification.

Exp Date: _____ Commission Number: _____

NOTARY STAMP HERE

Signature of notary Public: _____

Printed Name of Notary Public: _____



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ACKNOWLEDGEMENT FORM

I have read and understand the above instructions. Hearing date(s) will be confirmed when I receive a copy of the Notice of Public Hearing stipulating the day and time of any applicable hearings.

I acknowledge that I, or my representative, must attend any applicable meetings scheduled for the Hearing Examiner and City Council.

I will have the opportunity at the hearing to present information pertaining to my request that may not be included in my application.

I understand any decision rendered by the CITY shall be subject to a thirty (30) day appeal period. Any work performed within the thirty (30) day time frame or during the APPEAL process will be completed at the applicant's risk.

I understand I am responsible for all fees, including advertising and recording costs. All fees are to be submitted to the City of Cape Coral with the application.

By submitting this application, I acknowledge and agree that I am authorizing the City of Cape Coral to inspect the subject property and to gain access to the subject property for inspection purposes reasonably related to this application and/or the permit for which I am applying.

I hereby acknowledge that I have read and understood the above affidavit on the _____ Day of _____, 20_____.

CORPORATION/COMPANY NAME

OWNER'S NAME (TYPE or PRINT)

OWNER'S SIGNATURE

STATE OF _____, COUNTY OF _____

Sworn to (or affirmed) and subscribe before me, by means of physical presence or online notarization, on this _____ day of _____, 20__ by _____, know is personally known to me or produced _____ as identification.

Exp Date: _____ Commission Number: _____

NOTARY STAMP HERE

Printed Name of Notary Public: _____



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AUTHORIZATION TO REPRESENT PROPERTY OWNER(S)

PLEASE BE ADVISED THAT _____
(Name of person giving presentation)

IS AUTHORIZED TO REPRESENT ME IN THE REQUEST BEFORE THE HEARING EXAMINER AND CITY COUNCIL.

UNIT _____ BLOCK _____ LOT(S) _____ SUBDIVISION _____

OR LEGAL DESCRIPTION _____

LOCATED IN THE CITY OF CAPE CORAL, COUNTY OF LEE, FLORIDA.

PROPERTY OWNER (Please Print)

PROPERTY OWNER (Signature & title)

PROPERTY OWNER (Please Print)

PROPERTY OWNER (Signature & title)

STATE OF _____, COUNTY OF _____

Sworn to (or affirmed) and subscribe before me, by means of physical presence or online notarization, on this _____ day of _____, 20__ by _____, know is personally known to me or produced _____ as identification.

Exp Date: _____ Commission Number: _____

NOTARY STAMP HERE

Signature of notary Public: _____

Printed Name of Notary Public: _____

Note: Please list all owners. If a corporation, please supply the Planning Division with a copy of corporation papers.



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DOCUMENTARY EVIDENCE (LDC, Section 3.1.11F.6)

A copy of all documentary evidence shall be made available to the decision-making body or the Hearing Examiner and to staff no later than three business days prior to the hearing of the application. This requirement includes information that the applicant intends to present at public hearing.

I have read the above requirement and agree to comply with this provision.

OWNER/APPLICANT NAME (TYPE OR PRINT) OWNER/APPLICANT SIGNATURE

STATE OF _____, COUNTY OF _____

Sworn to (or affirmed) and subscribe before me, by means of physical presence or online notarization, on this _____ day of _____, 20__ by _____, know is personally known to me or produced _____ as identification.

Exp Date: _____ Commission Number: _____

NOTARY STAMP HERE

Signature of notary Public: _____

Printed Name of Notary Public: _____