



**City of Flagler Beach**  
P.O. Box 70 - 116 South 3<sup>rd</sup> Street  
Flagler Beach, Florida 32136  
Phone (386) 517-2000 Fax (386) 517-2016

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**PRELIMINARY PLAT APPLICATION**

**INFORMATION PACKET**

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## **GENERAL INFORMATION**

- Preliminary Plat applications may be obtained at the Building, Planning and Zoning Department and may be initiated by the owner of the property involved or his legally designated representative.
- Applicants for preliminary plat approval are required to arrange a pre-application conference prior to the Planning and Architectural Review Board submittal deadline to discuss their requests with a member of the Building, Planning and Zoning Department. You may arrange an appointment by calling 386-517-2000.
- Submittals received after the established Planning and Architectural Review Board meeting date will be placed on the agenda of the next available meeting. Submittals determined to be incomplete, upon receipt of the required documents will be placed on the next available meeting agenda.
- Planning and Architectural Review Board meetings are held regularly on the first Tuesday of each month, beginning at 5:30 p.m. A schedule of meeting dates and deadlines is available at the Building, Planning and Zoning Department.

## **GENERAL PROCEDURE**

- An application for preliminary plat review and approval accompanied by support documents shall be submitted to the Building, Planning and Zoning Department.
- Once the Building, Planning and Zoning Department has determined that the application and support documents are complete, the application and support documents will be distributed to appropriate City Departments and/or contracted agencies, for review and comment.
- Upon favorable review by the respective departments and/or agencies, the Building, Planning and Zoning Department shall place the application upon the next appropriate Planning and Architectural Review Board agenda.
- The Planning and Architectural Review Board will forward a recommendation of approval or denial to the City Commission wherein, a final decision will be rendered.
- Upon approval of the preliminary plat, the applicant shall submit a final plat application package to the Building, Planning and Zoning Department to initiate the final plat process.

## **PRELIMINARY PLAT APPLICATION SUBMITTAL REQUIREMENTS**

- An application for plat together with the appropriate fees shall be submitted with forms provided by the Building, Planning and Zoning Department.
- The application shall be accompanied by fifteen (15) copies of a survey/site plan and any additional documents.
- All plans shall be folded and bound together in separate plan sets with a cover sheet indicating plan sheet numbers.
- The overall size of plans shall be twenty-four (24) by thirty six (36) inches drawn at a scale no smaller than one (1) inch equals one-hundred (100) feet except when a smaller scale is approved by the Building, Planning and Zoning Department.
- All plans shall be prepared by professional land surveyor, or engineer, actively licensed and registered in the State of Florida.

### **FEE SCHEDULE**

- Preliminary Plat Review Fee: **\$1,000 and \$25.00 per lot**
- Zoning Review Fee: **\$25.00**
- Applicant is responsible for all costs associated with project review by City Engineer, and/or contracted agencies.

## **PRELIMINARY PLAT CHECKLIST**

The information and attachments requested as part of this application are the minimum necessary to determine compliance with the requirements of the City of Flagler Beach Zoning Ordinance. The City may require additional information, or waive certain requirements, at any time during the application process.

Application

Review Fees

Recorded warranty deed

Sealed plans

Survey/Site Plan

**YOU MUST PROVIDE FIFTEEN (15) COMPLETE PACKAGES  
( packages shall include one (1) of each item listed above except the review fees )**

**PRELIMINARY PLAT REVIEW APPLICATION  
CITY OF FLAGLER BEACH**

**Applicant:** \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Agent for Applicant:** \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Address/Location of Subject Property:**

\_\_\_\_\_  
\_\_\_\_\_

**Legal Description of Property:**

\_\_\_\_\_  
\_\_\_\_\_

**Total acreage/square footage of Subject Property:**

\_\_\_\_\_

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

Associated Applications: (e.g. Rezoning, Comprehensive Plan Amendment, Etc.)

\_\_\_\_\_

Current Use of Land:

\_\_\_\_\_

Description of Proposed Development:

\_\_\_\_\_  
\_\_\_\_\_

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Signature of Applicant

Print or type name

Date

\_\_\_\_\_  
Signature of Agent

\_\_\_\_\_  
Print or type name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Print or type name

\_\_\_\_\_  
Date

**NOTE: IF THE APPLICANT IS REPRESENTED BY AN AGENT, THE FOLLOWING POWER OF ATTORNEY MUST BE PROPERLY EXECUTED. IN ADDITION, IF THE APPLICANT IS NOT THE OWNER OF THE SUBJECT PROPERTY, WRITTEN PERMISSION IS REQUIRED FROM THE CURRENT PROPERTY OWNER THAT THE APPLICANT IS AUTHORIZED TO SEEK PLAT APPROVAL.**

**POWER OF ATTORNEY AFFIDAVIT**

I, \_\_\_\_\_ certify that I am the owner or authorized representative of the property described herein, and that all answers to the questions in this application and any sketches, data or other supplementary matter attached to and made a part of this application, are honest and true to the best of my knowledge and belief.

**KNOW ALL MEN THAT I, \_\_\_\_\_, do hereby constitute and appoint \_\_\_\_\_, to execute the foregoing instrument in my name, place and stead this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of owner or authorized agent

\_\_\_\_\_  
Print or type Name

\_\_\_\_\_  
Name of owner/agent entity if a corporation, L.L.C., Partnership, Trust, Etc.

\_\_\_\_\_  
Representative capacity of person signing Affidavit:  
President or Vice President of Corporation  
Managing Member of L.L.C.  
General Partner  
Trustee

STATE OF FLORIDA  
COUNTY OF FLAGLER

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification and who did not take an oath.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Print or type name

My commission expires: \_\_\_\_\_