



# City of Parkland Planning and Zoning Department

6600 University Drive, Parkland, FL 33067 Phone (954) 753-5040 Fax (954) 341-5161

STAFF USE ONLY
Intake Date: _____
By: _____
Fee Paid: _____
Receipt: _____
Petition #: _____

## SPECIAL EXCEPTION USE APPLICATION

### INSTRUCTIONS TO APPLICANTS:

1. Please complete all questions on the application. If not applicable, indicate with N/A.
2. Provide required attachments as shown on the attached checklist.
3. Filing Fees required to be paid:
  - a. Special Exception Use Application - a filing fee in the amount of two thousand five hundred dollars (\$2,500) for a filing fee, one thousand nine hundred dollars (\$1,900.00) for advertising fees, engineering fees in the amount of one thousand dollars (\$1,000.00) and an initial escrow in the amount of one thousand dollars (\$1,000) for professional fees. (Please note that the escrow must maintain a minimum balance of \$500.00 at all times.) Since advertising and professional costs vary, the final amount due will be reconciled upon receipt of newspaper and professional contractor invoices.

### I. PROPERTY OWNER AND AGENT INFORMATION

#### Property Owner(s) of

Record: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Applicant (if other than owner): \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Agent & Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Consultants: If applicable to your request, please attach a separate list of all consultants that will provide information on this request. You should include the name, address, telephone number, and fax number as well as the type of professional service provided.

### II. PROPERTY LOCATION

- A. Is the subject property located within one mile of another municipality? [ ] yes [ ] no  
If 'yes' please specify: \_\_\_\_\_
- B. Folio Number: If additional folios, list on a separate sheet and attach to the application.  
Folio: [ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]--[ ][ ][ ]--[ ][ ][ ][ ]
- C. Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Total Acreage of Subject Property \_\_\_\_\_
- D. Project Name: \_\_\_\_\_

E. Project Address: \_\_\_\_\_

F. General Location Description (proximity to closest major intersection in miles or fractions thereof): \_\_\_\_\_

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

**III. PROJECT HISTORY**

(List in sequence from first application to most recent – attach additional page if necessary):

Petition Number	Request	Action	Date	Resolution Number

**IV. ADJACENT PROPERTIES**

Adjacent Property to the:	Land Use Designation	Zoning Designation	Existing Use(s) of Property	Approved Use(s) of Property*	Petition & Resolution Number
SUBJECT SITE					
NORTH					
SOUTH					
EAST					
WEST					

- If adjacent land supports a previous approval by the City of Parkland, please include a brief description of the approved use(s) and the approved square footage or number of dwelling units.

**V. COMPLIANCE**

A. Is property in compliance with all previous conditions of approval and/or applicable Code requirements?

[ ] yes [ ] no List conditions and explain how the property is now in compliance. \_\_\_\_\_

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

B. Code Enforcement Case Number(s): \_\_\_\_\_

**VI. APPLICANT'S STATEMENT OF JUSTIFICATION (Attach additional sheets if necessary)**

The applicant is to explain how the request conforms to the following findings:

- A. The positive and negative effects the proposed use will have on the neighborhood or area and the community in general and the design of the proposed use will minimize adverse effects, including visual impact and intensity of the proposed use on adjacent lands.

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- B. How does the proposed use affect the design capacity of the adjacent roadways, what are the particular traffic generation characteristics of the proposed use, including the type of vehicular traffic associated with such use, and what are the traffic generation characteristics of other uses permitted in the particular zoning district.

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- C. What is the availability of and impacts upon the capacity of utilities, community facilities and public services such as police and fire protection, water and sewer service, etc.

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- D. How does the proposed use conform to the stated goals, objectives, policies and land uses established by the City's Comprehensive Plan.

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E. That the proposed request will ensure general compatibility with adjacent properties and other property in the district (use and character).

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F. That the proposed request complies with all Code of Ordinance standards for use, layout, function and general development characteristics.

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G. That the proposed request is not out of scale with the needs of the neighborhood or City.

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**OWNER ACKNOWLEDGEMENT**

I/We: \_\_\_\_\_, do hereby swear/affirm that I/we am/are the owner(s) of the property referenced in this application.

I/We certify that the above statements and the statements or showings made in any paper or plans submitted herewith are true to the best of my/our knowledge and belief. Further, I/we understand that this application, attachments and fee become part of the official record of the Planning & Zoning Department of the City of Parkland and the fee is not refundable. I/We understand that any knowingly false information given by me/us will result in the denial, revocation or administrative withdrawal of the application or permit. I/We further acknowledge that additional information may be required by the City of Parkland in order to process this application.

I/We further consent to the City of Parkland to publish, copy or reproduce any copyrighted document for any third party submitted as part of this application.

Signature(s) of Owner(s)\_\_\_\_\_

Print Name(s)\_\_\_\_\_

**CONSENT STATEMENT**  
Owner to complete if using agent/representative

I/We, the aforementioned owner(s), do hereby give consent to \_\_\_\_\_ to act on my/our behalf to submit this application, all required material and documents, and attend and represent me/us at all meetings and public hearings pertaining to the request(s) and property I/we own described in the attached application. Furthermore, as owner(s) of the subject property, I/we hereby give consent to the party designated above to agree to all terms or conditions that may arise as part of the approval of this application for the proposed use.

Signature(s) of Owner(s)\_\_\_\_\_

Print Name(s)\_\_\_\_\_

**NOTARY**

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_. He/She is personally known to me or has produced \_\_\_\_\_ as identification and did/did not take an oath.

\_\_\_\_\_  
(Signature of Notary) My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
(Name – Must be typed, printed, or stamped) (NOTARY'S SEAL OR STAMP)



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### SPECIAL EXCEPTION USE SUBMITTAL CHECKLIST

#### ***I. GENERAL***

PLEASE CHECK		
YES	NO	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- a. A completed application signed by owner, agent and/or applicant. Agent's authorization or power of attorney must be attached if applicant is other than owner.
- b. Required application fee.
- c. Copy of Warranty Deed including property control number or folio number and legal description of the property.
- d. Recent aerial photograph of the site and adjacent properties with a minimum scale of 1"=300.
- e. Ten (10) copies of a survey (not more than a year old) including any and all easements of record (referenced by OR Book and page, signed and sealed by a surveyor registered in the State of Florida.)
- f. An impact analysis report in accordance with Section 13-64 of the Code of Ordinances
- g. A Site Plan which meets all requirements of Section 40-20C - Contents of Application for Site Plan approval.



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### SPECIAL EXCEPTION USE PROCESS

**Total time approximately 3 to 4 months**

3-5 days

5 weeks

3 to 5 weeks

3 to 5 weeks

Complete Application Submission

Project Sufficiency  
(Exact date of DRC Meeting determined by sufficiency date)

Development Review Committee (DRC)  
*2<sup>nd</sup> or 4<sup>th</sup> Tuesday of each month*

Development Review Committee Certification

Planning and Zoning Board/Public Hearing  
*2<sup>nd</sup> Thursday of the month*

City Commission Public Hearing  
*1<sup>st</sup> Wednesday of the following month (If necessary)*

Public Hearing  
\*Mail Out  
15-30 days prior to public hearing  
300' radius  
\*Posting  
10-15 days prior to public hearing  
\*Advertise  
10-15 days prior to public hearing

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\*Mail Out  
15-30 days prior to public hearing  
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