



# 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 # \_\_\_\_\_

Case #: \_\_\_\_\_

☐ Administrative review only (sec.22-204H.)

☐ Commission review only (sec. 22-199 J.2)

☐ Full review process (sec. 22-199 J.1)

## ANTI-MONOTONY APPLICATION

### INSTRUCTIONS TO APPLICANTS:

1. Please complete all information on the application and provide attachments.
2. Please provide a location map showing subject property, adjacent lots and surrounding lots. The location map must show at least two (2) lots on either side of subject property and three (3) lots directly across from subject property.
3. Please provide the following information for **ALL** adjacent properties and surrounding properties building elevation, body paint color, trim paint color, roof color, and roof style. Map required must show listed information. (photographs of surrounding homes). Identify vacant lots, if applicable.
4. Please provide paint chips or samples and material specifications as applicable for proposed changes to residence.
5. Please provide the following information for existing condition and adjacent properties.

### I. PROPERTY OWNER/APPLICANT 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: \_\_\_\_\_

### II. PROPERTY LOCATION & INFORMATION

A. Folio Number: [ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]

B. Community: \_\_\_\_\_

C. Subdivision: \_\_\_\_\_

D. Property Address: \_\_\_\_\_

E. Property Lot/Block: \_\_\_\_\_

F. Model/Elevation: \_\_\_\_\_

G. House Color/Trim: \_\_\_\_\_ H. Roof Color/Style: \_\_\_\_\_