



**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 #: _____

**UNITY OF TITLE APPLICATION**

**INSTRUCTIONS TO APPLICANTS:**

1. Please complete all sections of this application. If not applicable, indicate with N/A.
2. Provide required attachments as shown on the checklist.
3. Pay a filing fee in the amount of three hundred fifty hundred dollars (\$350.00), one hundred dollars (\$100.00) for engineering fees and five hundred dollars (\$500.00) for professional fees.

**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. Property Control Number (PCN): If additional PCNs, list on a separate sheet and attach to the application.

PCN: [ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]--[ ][ ]

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. REQUEST**

Describe your request in detail: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IV. PROJECT HISTORY**

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

Petition Number	Request	Action	Date	Resolution Number

**V. ADJACENT PROPERTIES**

Adjacent Property to the:	Land Use Designation	Zoning Designation	Existing Use(s) of Property	Approved Use(s) of Property*	Petition & Resolution Number
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.

**VI. COMPLIANCE**  
(Attach additional sheets, if necessary)

A. Is property in compliance with all previous conditions of approval and/or applicable Code of Ordinance requirements? [ ] yes [ ] no If no, please explain \_\_\_\_\_

\_\_\_\_\_

B. Report on the status of all previous conditions of approval: \_\_\_\_\_

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

**DECLARATION OF UNITY OF TITLE**

In consideration of the issuance of a permit by the City of Parkland, the undersigned hereby agrees to restrict the use of lot(s) \_\_\_\_\_, Blocks \_\_\_\_\_, Subdivision \_\_\_\_\_, Plat Book \_\_\_\_\_, of the Public Records of Broward County, Florida, of property being otherwise described by metes and bounds as: \_\_\_\_\_

in the following manner:

1. That said property shall be considered as one plot and parcel of land, and that no portion of said plot and parcel of land shall be sold, transferred, devised, or assigned separately except in its entirety as one plot of parcel of land. The conveyance of right-of-way required by government shall not be deemed to violate this Unity of Title.
2. The undersigned further agrees that this condition, restriction and limitation shall be deemed a covenant running with the land, and shall remain in full force and effect, and be binding upon the undersigned, their heirs and assigns, until such time as the same may be released in writing by the City of Parkland Planning and Zoning Director and the City Engineer and his/her designee.
3. The undersigned further agrees that this instrument shall be recorded in the Public Records of Broward County.
4. This unity is placed on the aforementioned property for the purpose of:

OWNER	WITNESSES (2)

**STATE OF FLORIDA  
COUNTY OF BROWARD**

I HEREBY CERTIFY THAT ON THIS \_\_\_\_\_ day of \_\_\_\_\_, A.D., 20 \_\_\_\_, before me personally appeared \_\_\_\_\_ and the persons described in and who executed the foregoing instrument, and they acknowledged to me the execution thereof to be their free act and deed for the uses and purposes therein mentioned. He/She is personally known to me or has produced \_\_\_\_\_ as identification and did/did not take an oath.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

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

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

**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)\_\_\_\_\_



# CITY OF PARKLAND

## Planning and Zoning Department

6600 University Drive, Parkland, FL 33067 (954) 753-5040

### UNITY OF TITLE 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"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- a. A completed Unity of Title application and the General 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 fees
- c. Three (3) copies of the recorded warranty deed including property control number or folio number and legal description of the property. If the applicant is not the owner of record, submit a copy of a recorded contract or a letter of authorization from the legal owner. If an authorized representative is applying for the applicant, submit a notarized letter of authorization from the applicant.
- d. Five (5) copies of a signed and sealed survey (not more than a year old) including any and all easements of record (reference by OR Book and page, prepared by a surveyor registered in the State of Florida). The survey must indicate the area of the Unity of Title with a complete legal description. The legal description on the survey should match the legal description which is recorded on the Warranty Deed and Unity of Title. A location sketch should also be included in the survey. The size of the survey's should not measure less than 8 1/2" x 11" and should not exceed 11" x 17".
- e. Copies of all Resolutions affecting the property.
- f. Justification for the Unity of Title. The Justification shall be provided in Section III of this application. Make sure all details to your request are provided.
- g. Letter from the title company or attorney stating that the applicant is the owner of the property and has the authority to submit the application.
- h. If there are any mortgages, a letter must be received on its letterhead approving the application and unity of title.
- i. Schedule a meeting with Planning and Zoning staff to review your application prior to submittal.