



City of Minneola  
Planning Department  
800 N Highway 27, Minneola, FL 34715  
(352) 394 – 3598 x172

### Large Scale Comprehensive Plan Amendment

This checklist is based on the relevant provisions of Chapter 98-4 (b) – Large Scale Comprehensive Plan Amendment – of the Minneola, FL Code of Ordinances. The code is available online at [www.municode.com](http://www.municode.com). The requirements below are minimums that may be adjusted in the pre-application conference.

Rec'd	Submission Requirements
	(1) copy of the Legal Description or Warranty Deed
	(6) 24" x 36" copies of the Boundary Survey
	(2) 11" x 17" copies of the Boundary Survey
	Non-Refundable fee of \$2,350.00
	((6) 24" x 36" and (2) 11" x 17" copies of conceptual plan (if there is one)
	(1) copy of the completed application with checklist
	(1) copy of the 1 <sup>st</sup> page of the property record cards for all parcels within 300 ft. or (1) copy of the completed Adjacent Property Owner's form.
	(1) complete set of mailing labels for all adjacent property owners within 300 ft of the subject parcel
	(1) CD of all applications and documents in PDF format

Transmit to:

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Planning Department  
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POST OFFICE BOX 678, MINNEOLA, FLORIDA 34755 ♦ (352) 394-3598 ♦ FAX (352) 394-7201

# City of Minneola

## Large Scale Comprehensive Plan Amendment Cont.

### Application Review Process

#### Development Review Process (DRP)

- The DRP reviewers shall review every application and make recommendations to the Planning & Zoning Commission (P&Z)
- The DRP will provide written comments/recommendations to the applicant and the P&Z

#### Planning and Zoning Commission (P&Z)

- A P&Z review is required by the City Code
- The Planning Dept. (Dept.) is responsible to ensure the proper legal advertising is done in a timely manner
- The applicant is responsible to correctly post the required signs on the site in a timely manner and pursuant to the instructions supplied by the Dept.
- Applications need to be submitted by the 1st of the month to be considered at the next month's Planning & Zoning Commission meeting. Any and all supporting documents that need to be reviewed by the Commission need to be submitted by the 15th of the same month to be included in the packet for review.

#### City Council

- The City Council usually conducts one, or more, public workshops prior to initiating their formal consideration of an annexation application
- Since the available workshop dates are limited, the Dept. will advise the applicant of the next available workshop date
- Upon City Council's completion of the workshop process, the Dept. will do an additional legal advertisement and the applicant must again post signs on the site as described above
- The City Council must conduct two public hearings regarding the proposed annexation
- The City Council may defer consideration of the subject application at any time

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#### CERTIFICATION

I, the undersigned, do hereby certify that I have read this Checklist and understand the requirements described therein. I further understand that only application packages that have been determined complete by the Department prior to the agenda deadline will be scheduled for processing.

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Owner or Authorized Applicant Signature

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Date

## City of Minneola

### Large Scale Comprehensive Plan Amendment Cont.

The application material described herein is based on the provisions of Section 98-4 (b) of the City Code, Chapter 163, Part II, Florida Statutes. A Large Scale Plan Amendment is one that involves 10.1 acres or more.

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Phone #: \_\_\_\_\_ Fax # and/or E-mail: \_\_\_\_\_

General Location and/or Street Address: \_\_\_\_\_

Alternate Key Number: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Owner Phone #: Fax# and/or E-mail: \_\_\_\_\_

Subject Site Area (acres or sq. ft.): Present Use: \_\_\_\_\_

Existing County FLUM: \_\_\_\_\_ Existing County Zoning: \_\_\_\_\_

Existing Potable Water Source: \_\_\_\_\_

Existing Sewage Disposal Method: \_\_\_\_\_

Present Use: \_\_\_\_\_

Proposed FLUM: \_\_\_\_\_ Proposed City Zoning: \_\_\_\_\_

Proposed Potable Water Source: \_\_\_\_\_

Proposed Sewage Disposal Method: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Reasons for the Request: \_\_\_\_\_

Adjacent Roadway Classification & LOS: \_\_\_\_\_

Person to be contacted regarding this application (e.g. engineer, architect, attorney, etc.):

Contact Name: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

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City of Minneola  
Large Scale Comprehensive Plan Amendment Cont.

Certification

I, the undersigned, do hereby certify that I have read the application and the relevant guidance material and understand the requirements described therein and that I will fully comply with all City, State and Federal regulations applicable to this project.

I understand that the application fee is non-refundable.

I further understand that I am responsible to reimburse the City for the actual advertising costs, mailing costs, AND the actual consultants' review fees, if any. Said fees shall be paid within 30 days of receipt of the City's invoice or further processing of the application will cease until the invoice is paid in full.

I understand that only application packages that are determined complete by the Department will be scheduled for review.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
*Office Use:*

Applicant Name: \_\_\_\_\_

Application For: \_\_\_\_\_

Amount: \_\_\_\_\_ Check: \_\_\_\_\_

Amount: \_\_\_\_\_ Check: \_\_\_\_\_

Rec'd by: \_\_\_\_\_ Date: \_\_\_\_\_ Receipt #: \_\_\_\_\_

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City of Minneola  
Large Scale Comprehensive Plan Amendment Cont.

Owner's Authorization  
*(required if the property owner is not the applicant)*

STATE OF FLORIDA  
COUNTY OF LAKE

Before me, the undersigned authority, personally appeared \_\_\_\_\_

who is being by me first duly sworn on oath, deposes and says:

1. That he/she is the property owner of the subject parcels in this application.
2. That he/she desires to apply for a large scale comprehensive plan amend generally located at:  
\_\_\_\_\_
3. That he/she has appointed \_\_\_\_\_  
to act as agent in his/her behalf to accomplish the above.
4. That he/she agrees to pay any costs associated with the application, regiew, and hearings for the above.

\_\_\_\_\_  
Owner's Signature

This is to certify that on \_\_\_\_\_, 20\_\_\_\_ before me,  
an officer duly authorized to take acknowledgements in the State and County aforesaid, personally  
appeared \_\_\_\_\_ he/she is personally know to me or has  
produced \_\_\_\_\_ as identification and did (did not) take an oath.

SEAL

\_\_\_\_\_  
Signature of Acknowledger

\_\_\_\_\_  
Acknowledger Name

\_\_\_\_\_  
Serial Number

\_\_\_\_\_  
My Commission Expires

**City of Minneola**  
**Large Scale Comprehensive Plan Amendment Cont.**

**Adjacent Property Owners**

Type a list of owner's names and mailing addresses for all property owners lying within 300 ft of all sides of the property described in the attached application, as recorded in the current County tax rolls, or attach copies of the appropriate property record card.

Alternate Key #	Property Owner	Address, include Zip Code

*Use additional pages as necessary.*



City of  
**Minneola**  
FLORIDA

**City of Minneola**

800 N. US Hwy 27

Minneola, FL 34715

(352) 394-3598

**Waiver / Disclaimer and Condition Pursuant to Chapter 166.033, Florida Statutes**

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

Authorized Representative\*: \_\_\_\_\_

Application Number: \_\_\_\_\_

Application Request: \_\_\_\_\_

I, \_\_\_\_\_ (Print Applicant / Authorized Representative\*

name), on behalf of \_\_\_\_\_ (Applicant) hereby waive the deadlines and/or procedural requirements of Florida Statute Section 166.033 as the provisions of said statute apply to the above referenced application, including, but not limited to:

- 30-day Staff review of Applicant's application and/or response to Request for Additional Information
- 30-day requirement for Applicant's response to City's Request for Additional information
- The limitation of three (3) requests by the City of Minneola for additional information.
- Requirement of Final Determination on Applicant's application approving, denying, or approving with conditions within 120 or 180 days of the determination of incompleteness, as applicable.

I further acknowledge that the City offers weekly development review meetings on Thursdays for me to discuss any comments I received based on my submittal. It is my responsibility to request and schedule a meeting with the City if I have any questions.

\_\_\_\_\_  
Signature of Applicant or Authorized Representative\*

\_\_\_\_\_  
Date

\*Agent Authorization Form required.