



## CITY OF NORTH PORT

Development Services  
Planning Division  
4970 City Hall Boulevard  
North Port, FL 34286-4100  
www.northportfl.gov  
Phone (941) 429-7156

DATE RECEIVED – DATE STAMP

### Development Master Plan Packet

The following items are to be included in the submission:

- Development Master Plan Application
- Affidavit(s)
- Development Master Plan Checklist
- Development Master Plan Fee Sheet

**\*Note\***

Please be advised that each application is considered a separate petition and will be reviewed as such. Packets will not be processed if incomplete or missing requested information.

If there is more than one property owner of the subject property, all owners must complete an affidavit.

DATE RECEIVED – DATE STAMP



**City of North Port**  
**Neighborhood Development Services**  
4970 City Hall Boulevard, North Port, FL 34286  
Phone: (941) 429-7156 Fax: (941) 429-7164  
Web [www.northportfl.gov](http://www.northportfl.gov)

## DEVELOPMENT MASTER PLAN (DMP) APPLICATION

Upon making any application to the City for any reason, the applicant agrees to comply with all the requirements of the Unified Land Development Code and further agrees to allow authorized city staff and personnel to enter and inspect the property during normal business hours

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**Project Name:** \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_

**Name of Corporation/LLC (If Applicable):** \_\_\_\_\_

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

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**FAX No:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Name of Property Owner:** *(if different from the applicant above)*

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Street Address:

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City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Phone:** \_\_\_\_\_

**FAX No:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Name of Architect:** *(If Applicable)*

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Street Address:

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City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Phone:** \_\_\_\_\_

**FAX No:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Name of Engineer:** *(If Applicable)*

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Street Address:

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City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Phone:** \_\_\_\_\_

**FAX No:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Name of Attorney: (If Applicable)**

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Street Address:

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City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Phone:** \_\_\_\_\_

**FAX No:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Name of Surveyor: (If Applicable)**

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Street Address:

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City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Phone:** \_\_\_\_\_

**FAX No:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Name of Contractor: (If Applicable)**

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Street Address:

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City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Phone:** \_\_\_\_\_

**FAX No:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Property Description**

Parcel I.D. No. (s) (List Additional Parcel ID's on an attached sheet)

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_      \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_      \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_      \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Look for attached sheet

Land Use: \_\_\_\_\_

FLU: \_\_\_\_\_

Acreage: \_\_\_\_\_

Street Address:

\_\_\_\_\_

Legal: Lot(s): \_\_\_\_\_ Block: \_\_\_\_\_

Addition: \_\_\_\_\_ Tract or Parcel: \_\_\_\_\_

Subdivision:

\_\_\_\_\_

Section: \_\_\_\_\_ Township: \_\_\_\_\_

Range: \_\_\_\_\_ Acreage: \_\_\_\_\_

**Purpose of Application:**

Please briefly state what the intended use of the property will be and/or purpose of application:

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

**Has this property undergone previous City development review and approval?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_

If yes, when? (Month/Date/Year) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Has this property this property received variance, waiver or special exception use permit approval?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Is the property located in an Activity Center or Town Center?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_

If yes, which Activity Center: \_\_\_\_\_

**Existing land use (e.g., house, commercial structure, vacant):** \_\_\_\_\_

\_\_\_\_\_

**Surrounding existing land uses/zoning of adjacent properties:**

| Direction | Existing Land Uses | Future Land Use Map Designation | Zoning Map Designation |
|-----------|--------------------|---------------------------------|------------------------|
| North     |                    |                                 |                        |
| South     |                    |                                 |                        |
| East      |                    |                                 |                        |
| West      |                    |                                 |                        |

**Provide the following information relative to the proposed development: (Answer all that apply)**

|  |  |   |  |
|--|--|---|--|
| Total Acres                                    |  | Dwelling Units per Acre                         |  |
| Total Wetland Acres                            |  | Percentage of Acres devoted to Storm Water      |  |
| Total Acres devoted to Recreational/Open Space |  | Percentage of Acres devoted to Open Space       |  |
| Percentage of Lot Covered by Building          |  | Floor Area Ratio                                |  |
| Total Commercial Acres                         |  | Total Building Square Footage of Commercial Use |  |
| Total Residential Acres                        |  | Total Number of Residential Units               |  |
| Total Government Acres                         |  | Total Building Square Footage of Government Use |  |
| Total Industrial Acres                         |  | Total Building Square Footage of Industrial Use |  |

**FIRE & RESCUE:**

Nearest Fire Hydrant: \_\_\_\_\_ (feet)

**TRAFFIC:**

List the Roadways immediately serving the site:

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**Nearest:**

Traffic Control Light: \_\_\_\_\_ (feet)

Stop Sign: \_\_\_\_\_ (feet)

**UTILITIES:**

**How will Potable Water service be provided?** Please contact North Port Utilities (941) 240-8000.

- \_\_\_\_\_ Private Well (Submit a letter or application from the Sarasota County Department of Health.)
- \_\_\_\_\_ North Port Utilities (Please provide a letter from the service provider stating that the proposed development is within their service area and that they have adequate capacity to serve the proposed development.)

**How will Sanitary Sewer service be provided?** Please contact North Port Utilities (941) 240-8000.

- \_\_\_\_\_ Private Septic System (If the property is located within the Conservation Restricted Overlay Zone, a class 1 aerobic water treatment system is required for single family home sites. Submit a letter or application to the Sarasota County Department of Health.)
- \_\_\_\_\_ North Port Utilities (Please provide a letter from the service provider stating that the proposed development is within their service area and that they have adequate capacity to serve the proposed development.)

**STORMWATER:**

Please contact the City Stormwater Manager/Environmentalist at (941) 240-8321.  
(Flood Information can be found at [www.northportfl.gov](http://www.northportfl.gov) Search: Flood Update)

**Is the application site in a FEMA Hazardous Flood Zone?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_  
If yes, what zone?

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**Is the application site in the Conservation Restricted Zone?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_  
If yes, what zone?

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**Is the application site in the Big Slough Watershed Flood Zone?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_  
If yes, what is the 100-year 1-day flood elevation? \_\_\_\_\_ ft. NGVD

**Does the application site contain wetlands?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_  
If yes, how many existing wetland acres: \_\_\_\_\_

**Has the Departmental of Environmental Protection been notified of wetlands?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_



**Is the property located in the Myakka River Protection Zone?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_

**Is the property adjacent to the Myakka River jurisdictional wetlands?**

No: \_\_\_\_\_ Yes: \_\_\_\_\_

If yes, please provide acreage and map of the area and schedule a meeting with City Stormwater Manager/Environmentalist. Look for attached sheet

**ENVIRONMENTAL:**

**Are there any known Historical or Archaeological sites on the property?**

*(If unsure, please contact Sarasota County – Division of Historical Resources, (941) 316-1115.)*

No: \_\_\_\_ Yes: \_\_\_\_

Please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Has an Environmental Assessment Report/Review been prepared for this property?**

No \_\_\_\_ Yes \_\_\_\_ Date survey was conducted: \_\_\_\_\_

**Does the property contain gopher tortoise burrows, scrub jay habit, or any plant or animal species listed as “rare”, “threatened”, “endangered”, or “species of special concern” by State and /or Federal agencies? If yes, the applicant will be required to produce documents on how listed species or habitats will be protected or managed at the Site Development stage.**

No: \_\_\_\_\_ Yes: \_\_\_\_\_

If yes, please indicate which species: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**All information provided on this application is true and correct to the best of my knowledge.**

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**Signature of Applicant**

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**Date**

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**Print Applicant Name**



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### Development Master Plan Fees

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

Name of Corporation/LLC (If Applicable):  
 \_\_\_\_\_

Phone: \_\_\_\_\_

FAX No: \_\_\_\_\_

E-mail: \_\_\_\_\_

Property Location Street Address: \_\_\_\_\_  
 \_\_\_\_\_

**Property Description**

Parcel I.D. No. (s) (Additional PID's should be listed on an attached sheet) Look for attached sheet

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-      \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-  
 \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-      \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

### Master Plan Fee Calculation

| Function               | Fees          |  |
|------------------------|---------------|--|
| Baseline Fee           | \$3,960       |  |
|                        |               |  |
| Additional Fees        | \$11 per acre |  |
|                        |               |  |
| Fiscal Impact Analysis | \$250         |  |
|                        |               |  |
| <b>Total:</b>          |               |  |

**\*All fees should be made payable to the City of North Port. Fees must be paid prior to the processing of the submittal.**

Please contact Planning Staff if you have any questions, 941.429.7156

# AFFIDAVIT

I (the undersigned), \_\_\_\_\_ being first duly sworn, depose and say that I am the owner, attorney, attorney-in-fact, agent, lessee or representative of the owner of the property described and which is the subject matter of the proposed application; that all answers to the questions in this application, and all sketches, data and other supplementary matter attached to and made a part of the application are honest and accurate to the best of my knowledge and belief. I understand this application must be complete and accurate before the application can be processed or hearing can be advertised, and that I am authorized to sign the application by the owner or owners. I authorize City of North Port staff and agents to visit the site as necessary for proper review of this application. *If there are any special conditions such as locked gates, restricted hours, guard dogs, etc., please provide the name and telephone number of the individual who can allow access.*

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

\_\_\_\_\_  
Signature of Applicant or Authorized Agent

\_\_\_\_\_  
Print Name and Title

**STATE OF** \_\_\_\_\_,

**COUNTY OF** \_\_\_\_\_

The foregoing instrument was acknowledged by me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification.

(Place Notary Seal Below)

\_\_\_\_\_  
Signature - Notary Public

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## AFFIDAVIT AUTHORIZATION FOR AGENT/APPLICANT

I, \_\_\_\_\_, property owner, hereby authorize \_\_\_\_\_ to act as Agent on our behalf to apply for this application on the property described as (legal description) \_\_\_\_\_

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date

**STATE OF** \_\_\_\_\_,

**COUNTY OF** \_\_\_\_\_

The foregoing instrument was acknowledged by me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification.

(Place Notary Seal Below)

\_\_\_\_\_  
Signature - Notary Public

## Checklist of Required Submittal Items:

### DEVELOPMENT MASTER PLAN

### ULDC SECTION 53-7

All lands proposed for a Development Master Plan (DMP) shall be suitable for the various purposes proposed in the request for approval. The developer shall demonstrate to the satisfaction of the Planning and Zoning Advisory Board and City Commission that the proposed DMP is specifically adapted and designed for the uses anticipated.

**Please DIGITALLY submit the following to [developmentpetitions@northportfl.gov](mailto:developmentpetitions@northportfl.gov) for distribution to reviewers: *\*Please mark NA for items that are not applicable***

**Item 1: Application (Section 53-7 C.3)**

Application form Provided by the City. Title of the project and names and addresses of any and all owners and agents involved in the development. The name of the attorney preparing any legal documents. The zoning classifications and future land use designation for the subject property, as well as for all abutting property.

**Item 2: Project Narrative**

Provide a brief explanation of the project in plain language. Describe the development and its operations, (hours of operation, deliveries, parking, sign locations and dimensions, etc.).

The developer shall also provide findings that demonstrate that the proposed DMP complies with the City of North Port Comprehensive Plan; the zoning regulations; and other sections of this Unified Land Development Code and other laws, ordinances, and regulations. (Section 53-7 A)

**Item 3: Ownership Documentation (Section 53-7 C.4)**

- a. Title Assurance or Current Deed, in the form of either a title certification by an attorney or a title insurance policy will be required. This title will match the Boundary, Topological, and other Maps of Item 6.
- b. Letter of Authorization, a notarized letter signed by all owners of the property authorizing the applicant to submit and be responsible for the application, if applicant is not the owner.
- c. Ownership and Unified Control, a notarized statement of ownership or unified control of the entire subdivision.
- d. Articles of Corporation/Organization, a set of formal documents filed with a government body to legally document the creation of a corporation. If Corporation or LLC is applicable it is necessary for the City to be aware of such business ties. Articles of incorporation must contain pertinent information such as the firm's name, street address, agent for service of process, and the amount and type of stock to be issued.

**Item 4: Planned Community Development Conformance (Section 53-7 C.1 and C.13)**

A statement of conformance with the intent and purpose of the PCD District as set forth in Sec. 53-115 of the Code and, if applicable, an approved application for a Development of Regional Impact (DRI).

**Item 5: Modifications for Public Interests (Section 53-7 C.2)**

A description of any proposed modifications of zoning or other applicable City regulations where it is intended by the applicant that such modifications serve the public interest to an equivalent degree.

**Item 6: Map of Proposed Development Master Plan (Section 53-7 C.5)**

The Plan shall include all properties contiguous to the DMP area for the evaluation of connectivity, design and aesthetic planning purposes as required in the Comprehensive Plan. (Section 53-7 B)

- (a) Scale, date, North arrow and general location map.
- (b) Boundaries, dimensions and acreage of the property involved and all existing streets, buildings, watercourses, easements, section lines and other important physical features, including major trees and tree masses in and adjoining the property
- (c) Generalized topography and soil condition.
- (d) Areas of historical or archaeological significance.
- (e) Generalized layout and description of drainage systems, potable water service, wastewater treatment and disposal service, solid waste disposal service and electric transmission and distribution service.
- (f) General locations and acreage or percentage of the uses proposed, including residential, commercial, industrial and government uses, buffer areas, open space, recreational uses, off-street parking and loading, foot paths, vehicular access using already designed roadways and by way of combined pedestrian and vehicular bridges to provide connectivity to adjacent neighborhoods, traffic flow and generalized landscaping plan as appropriate.
- (g) A development schedule indicating the approximate phasing of construction improvements.

**Item 7: Traffic Impact Statement (Section 53-7 C.6 and C.13)**

Provide a traffic impact statement (TIS) indicating how the proposed development will affect the adjacent neighborhood(s) and the primary impact area. The methodology, data and model shall be approved by the designated City Engineer, or designee.

**Item 8: Hurricane Evacuation (Section 53-7 C.7)**

Provide a hurricane evacuation plan which indicates what on-site/off-site provisions will be made for storm shelter space. This requirement only applies to proposed development within a designated hurricane storm surge zone.

**Item 9: Wetlands Survey (Section 53-7 C.8 and C.13)**

A wetlands survey which enumerates the acreage of wetlands on the site, what alterations or disturbances to wetlands are proposed and what wetlands will be preserved in their natural existing state; site plan showing the proposed development shall be submitted.

The wetlands survey and any alteration of the wetland shall be reviewed by the appropriate State agency or a Phase I Environmental Assessment shall be submitted. The State agency's comments, if available, shall be submitted with the Development Master Plan (DMP), application or prior to scheduling the Planning and Zoning Advisory Board hearing.

**Item 10: Wildlife Survey (Section 53-7 C.9 and C.13)**

A wildlife survey with a site plan, which identifies all species, including aquatic life, which nest, feed, reside on or migrate to the development tract.

- (a) The survey shall specify what measures will be taken to protect the wildlife and their habitats.
- (b) In the event wildlife species are considered endangered or threatened or of special concern, the Development Master Plan (DMP) shall identify such species and describe all proposed steps that shall be taken to protect them.
- (c) The wildlife survey and any proposed protective measure(s) shall be reviewed by the appropriate State agency.
- (d) The State agency's comments shall be submitted with the Development Master Plan (DMP) application or prior to scheduling the Planning and Zoning Advisory Board hearing.

**Item 11: Vegetation Survey (Section 53-7 C.9 and C.13)**

A vegetative survey, including a site plan, which identifies dominant plant communities, dominant species and other unusual or unique features of the vegetation association.

- (a) In the event there are any rare or endangered plants on the site, the Development Master Plan (DMP) shall identify such plants and describe the proposed protective measures to be taken.
- (b) The vegetative survey and any proposed protective measure shall be reviewed by the appropriate State agency or a Phase I Environmental Assessment shall be submitted.
- (c) The comments of the State agency, if available, shall be submitted with the Development Master Plan (DMP) application or prior to scheduling the Planning and Zoning Advisory Board hearing.

**Item 12: Financial Analysis (Section 53-7 C.11 and C.13)**

**\*NOTE: THE ANALYSES DESCRIBED BELOW WILL BE PERFORMED BY CITY STAFF WITH PERTINENT INFORMATION PROVIDED BY THE APPLICANT.**

There shall be performed a financial analysis, in a form and methodology as approved by staff, that defines the costs of providing City services to maintain adopted levels of service and the revenues that will be generated by the project within the first five years, and each subsequent five-year period until and including the expected buildout.

Based on this analysis, the applicant shall provide a further analysis that defines the development's proportionate fair share of the cost to maintain the levels of services. The timing of the improvements shall be incorporated into the development's phasing schedule, which shall be consistent with the City's Capital Improvement Project (CIP).

**Item 13: Deed Restrictions (Section 53-7 C.12 and C.13)**

Proposed deed restrictions or covenants or conditions of lease by which the developer proposes to bind those buying or leasing building sites to certain performance standards.

**Item 14: Building Elevations (Section 53-7 C.14)**

Examples of building elevations, including colors and material to be used on the facades, consistent architectural standards and documents indicating how the applicant shall enforce the architectural standards, mass of the structures and special relationships shall be submitted.

**Item 15: Storm Water Analysis (Section 53-7 C.15)**  
Provide a storm water analysis/assessment using a professionally accepted methodology. Data and model shall be approved by the City Manager or designee.

**Item 16: Additional Information (Section 53-7 C.16)**  
Any information not specifically called out by this list that the applicant feels pertinent to the development.

**Digital files:**

**Item 17: The entire submittal package, in PDF format, submitted to [developmentpetitions@northportfl.gov](mailto:developmentpetitions@northportfl.gov).** Please submit all project related spatial information in GIS Shapefile or File Geodatabase format as well. The data must have coordinates in at least 4 corners of the petition area, and not include any data from outside the project area. The Coordinate system must be: A Projected Coordinate System, State Plane, NAD 1983 HARN StatePlane Florida West FIPS 0902 (US Feet).

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