



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

Vacation of Easement Packet

The following items are to be included in the submission:

- Vacation of Easement Application
- Affidavit(s)
- Vacation of Easement Checklist
- Vacation of Easement 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.

There are additional costs included with this application. Fees for legal advertisements and adjacent property owner notifications will be billed to the applicant at actual cost. These costs shall be paid in full before any development orders/orders of approval are issued.

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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

VACATION OF PLATTED EASEMENTS 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

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)*

Street Address:

City: _____

State: _____ Zip Code: _____

Phone: _____

FAX No: _____

E-mail: _____

Name of Attorney: *(If Applicable)*

Street Address:

City: _____

State: _____ Zip Code: _____

Phone: _____

FAX No: _____

E-mail: _____

Name of Surveyor: *(If Applicable)*

Street Address:

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

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 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): _____

STORMWATER:

Please contact the City Stormwater Manager/Environmentalist at (941) 240-8321.

(Flood Information can be found at www.northportfl.gov Search: Flood Update)

Is the application site in a FEMA Hazardous Flood Zone?

No: _____ Yes: _____

If yes, what zone?

Is the application site in the Conservation Restricted Zone?

No: _____ Yes: _____

If yes, what zone?

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

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

Signature of Applicant

Date

Print Applicant Name

Checklist of Required Submittal Items:

VACATION OF PLATTED EASEMENT (VAC)

FLORIDA STATUTE 177.101

Please collate one (1) packet of each of the following for distribution to reviewers:

- Item 1: Application**
Provided by the Planning and Zoning Department this covers a variety of details about the property in question.

- Item 2: Ownership Documentation**
 1. 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 Survey and Site Plans of **Item 3**.
 2. 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.
 3. Ownership and Unified Control, a notarized statement of ownership or unified control of the entire subdivision.
 4. 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.
 5. Title Opinion of an attorney at law licensed in Florida or a certification by an abstractor or a title company showing that record title to the land as described and shown on the plat is in the name of the person, persons, corporation, or entity executing the dedication.

- Item 3: Boundary Survey, Site Plans and Sketch Descriptions of Easements to be Vacated**
To establish a clear idea of the property and the events leading up to this request, any and all boundary surveys and site plans for the property in question should be provided.

A recent signed and sealed survey of the property which shows the location of the current easement. A survey and legal description of the proposed new location of the easement together with an unexecuted grant of easement.

- Item 4: Project Narrative**
Please provide a brief description for why these easements need to be vacated.

- Item 5: Certification Taxes have been Paid**
A paid bill for the tax collector associated with the property. A tax collector's certification that state, county, and municipal taxes have been paid, the taxes shall be deemed to have been paid if, in addition to any partial payment under s. 194.171, the owner of the platted

lands sought to be vacated shall post a cash bond, approved by the tax collector of the county where the land is located and by the Department of Revenue, conditioned to pay the full amount of any judgment entered pursuant to s. 194.192 adverse to the person making partial payment, including all costs, interest, and penalties.

Item 6: Additional Information

Any additional data, maps, plans, surveys, or statements as determined by the City to be necessary, depending on the use or activity proposed. Not all projects are the same and some require more information than others.

Digital files:

The entire submittal package, in PDF format, submitted to developmentpetitions@northportfl.gov. Please submit all project related spatial information in either CAD .dwg , GIS Shapefile or File Geodatabase format on the disk as well. The data must have coordinates in at least 4 corners of the petition area. The Coordinate system must be: A Projected Coordinate System, State Plane, NAD 1983 StatePlane Florida West FIPS 0902 (US Feet).

Additional Process

Public Notice

Publishing a notice of intent in a newspaper of general circulation in the county in which the tract or parcel of land is located, in not less than two weekly issues of said paper and must attach to the petition for vacation the proof of such publication, together with certificates showing that all state and county taxes have been paid.

Planning and Zoning Advisory Board

Before any Vacation shall be approved, **the Planning and Zoning Advisory Board** shall determine that in granting the request that it will not adversely affect the public interest, health, safety and general welfare; and that the specific requirements are met.

Commission Meeting

Listening to the request of the applicant, the counsel of staff, and the opinion of the Planning and Zoning Advisory Board, Commission will determine whether to grant the Vacation of Easement.



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Vacation of Easement 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

_____-_____-_____- _____-_____-_____-
 _____-_____-_____- _____-_____-_____-

Vacation Calculation

Function	Fees	
4 Acres or Less	\$825	
More than 4 Acres, Less than 50 Acres	\$1,125	
More than 50 Acres	\$1,425	
Total:		

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

-Other billable fees will be assessed and will be required to be paid by the applicant as stated on the billable fee agreement.

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

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