

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

Urban Design Standard Review Packet

The following items are to be included in the submission:
UDSR Application
\$100 fee – checks payable to City of North Port
Affidavit(s)
UDSR checklist completely filled out

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.

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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

URBAN DESIGN STANDARDS REVIEW APPLICATION

Application Fee: \$100

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:		
Applicant:		
Corporation/LLC (If Applicable):		
Mailing Address:		
Phone:	Email:	
Property Owner:		
Phone:	Email:	

	ıble)	
Mailing Address:		
Phone:	Email:	
Mailing Address:		
	Email:	
	onal Parcel ID's on an attached sheet)	
Land Use:		
Acreage:		
Street Address:		
Legal: Lot(s):	Block:	
Addition:	Tract or Parcel:	· · · · · · · · · · · · · · · · · · ·
Subdivision:		
Section:		
Range:	Acreage:	

Purpose of Ap Please briefly	•	use of the property	will be and/or purpose of a	pplication:
Has this prope	erty undergone previous Cit	y development revi	ew and approval?	
No:	Yes:			
If yes, when? (I	Month/Date/Year)			
Is the property	/ located in an Activity Cent	er?		
No:	Yes:			
If yes, which A	ctivity Center:			
I have receive	on of City staff concerning	•	ign Standards Pattern Book Activity Center and Neighbo	
No:	Yes:			
All information	on provided on this appli	cation is true and	correct to the best of my k	nowledge.
Signature o	f Applicant		Date	
Print Applic	ant Name			

AFFIDAVIT

the undersigned),being first duly sworn, depose and say tl			
is the subject matter of the proposed application and other supplementary matter attached to and knowledge and belief. I understand this application or hearing can be advertised, and that I am auth North Port staff and agents to visit the site as	that all answers to the of made a part of the app on must be complete and norized to sign the applic necessary for proper re	of the owner of the property described and which questions in this application, and all sketches, data dication are honest and accurate to the best of my diaccurate before the application can be processed ation by the owner or owners. I authorize City of view of this application. If there are any special the provide the name and telephone number of the	
Sworn and subscribed before me this	_ day of	, 20,	
Signature of Applicant or Authorized Agent	Print Name and Ti	itle	
STATE OF	COUNTY OF		
The foregoing instrument was acknowledged by	me this day o	of, 20, by	
	who is	personally known to me or has produced	
		as identification.	
		(Place Notary Seal Below)	
Signature - Notary Public	R		
ΔΙΙΤΗΟΡΙΖΑΤ	AFFIDAVIT	-/ΔΡΡΙΙζΔΝΤ	
1.	A COLOR TO COLOR	, property owner, hereby	
	2017		
authorize	VCORPORA	to act as Agent on our behalf to apply	
for this application on the property described as (legal description)		
Owner	5/// (3/1	Date	
STATE OF	COUNTY OF		
The foregoing instrument was acknowledged by	me this day o	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

URBAN DESIGN STANDARD REVIEW

Item 1: Color Rendering Provide one ORIGINAL plus one copy of a color rendering(s) depicting the portion of the building that is visible from roadway and all public and interior shopping center rights-of-way.
 Item 2: Project Plans Provide one ORIGINAL plus one copy of the project plans prepared by an architect or State of Florida licensed engineer: Site plan – Provide one original plus 1 copy of the site plan which locates the building on the boundary survey sketch. Building elevations & floor plan – Provide one original plus 1 copy of the building elevations and floor plan.
Item 3: Landscaping Plans Provide one ORIGINAL plus one copy of the landscaping plans. Landscaping plans shall be submitted for a non-binding advisory review. These plans shall show the elevations of landscaping material as that material relates to and complements the structure's design including any freestanding signs. These plans shall show any structure not attached to the building that is over six inches in height.
Item 4: Lighting Plans Provide one ORIGINAL plus one copy of the lighting plans. Lighting plans for building exteriors shall be submitted showing the elevations and areas to be lighted, including any signage.
Item 5: Project Material/ Texture & Paint Samples Provide one set of the project paint color, tile, stucco texture and other applicable samples such as canopy material and color/trim samples.
 Item 6: Light Fixtures, Furniture, and Other Exterior Design Elements Provide either a sketch or an image of each the following, and note the materials and colors: Light fixtures – Poles and Lights; Furniture – Benches, Bike racks, Clock towers, Planters, Trash Receptacles; Fencing – Any perimeter fencing that will be used; Other – Trellises, Corbels, Other architectural features
Digital files The entire submittal package, labeled item by item, in PDF format, submitted on a Flash Drive.

REMINDER: ULDC CHAPTER 59-PUBLIC ART REGULATIONS APPLY IN ALL ACTIVITY CENTERS