



## 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

### Variance Packet

The following items are to be included in the submission:

- Variance Application
- Affidavit(s)
- Variance Checklist
- Variance Fee Sheet
- Billable Fee Payment Agreement

**\*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.

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)

## VARIANCE 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**

### Type of Variance (select one)

Commercial (\$975) \_\_\_\_\_ Residential (\$575) \_\_\_\_\_ Landscape (\$750) \_\_\_\_\_ Subdivision (\$900) \_\_\_\_\_

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

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

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

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

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

**Property Owner:** \_\_\_\_\_

*(if different than applicant)*

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

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

**Purpose of Application**

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

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

**Property Description**

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

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

Street Address (if any): \_\_\_\_\_

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

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

Subdivision: \_\_\_\_\_

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

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

Zoning Designation \_\_\_\_\_ Future Land Use Designation \_\_\_\_\_

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

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

**Is the property located in an Activity Center?** No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, which Activity Center: \_\_\_\_\_ NOTE: Public Art is required, Urban Design standards apply

**Is the property located in a Village District?** No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, which Village District: \_\_\_\_\_ NOTE: Village District Pattern Book standards applies

Has this property undergone previous City development review and approval? No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, what type of application (DMP, MAS, SCP, INF, etc) \_\_\_\_\_

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

Has this property received variance, waiver, or special exception approval? No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, please describe (attach extra sheets if necessary): \_\_\_\_\_

Provide the following information for 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	

**NEIGHBORHOOD MEETING:** Is the development greater than 1 acre or abutting a residential development? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, a Neighborhood Meeting is required (see ULDC §33-10(U)).

**FIRE & RESCUE:** Nearest Fire Hydrant: \_\_\_\_\_ (feet)

**TRANSPORTATION:**

List the Roadways immediately serving the site: \_\_\_\_\_

**Nearest:**

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

Sarasota County Area Transit Stop: \_\_\_\_\_ (miles)

**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, Elizabeth Wong 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? \_\_\_\_\_

**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.

**ENVIRONMENTAL:**

**Are there any known Historical or Archaeological sites on the property?** No \_\_\_\_ Yes \_\_\_\_  
(If unsure, please contact Sarasota County – Division of Historical Resources (941) 316-1115.)

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

**Has an Environmental Assessment Report/Review been prepared for this property?** No \_\_\_\_ Yes \_\_\_\_  
If yes, Date survey was conducted: \_\_\_\_\_

Does the property contain gopher tortoise burrows, scrub jay habitat, 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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

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:

### VARIANCE (VAR) ULDC SECTION 37-56

Please digitally provide the following via [developmentpetitions@northportfl.gov](mailto:developmentpetitions@northportfl.gov):

*\*Please mark NA for those that are not applicable*

**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 4**.
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.

**Item 3: Project Narrative (Residential or Commercial)**

Before any variance shall be approved, **the Zoning Board of Appeals** shall determine that the granting of the variance will not adversely affect the public interest, health, safety and general welfare; and that the specific requirements are met.

1. That there are exceptional or extraordinary conditions or circumstances that are inherent to the property in question and that do not apply generally to the other nearby properties in the same zoning district.
2. That the exceptional or extraordinary conditions or circumstances are not the result of actions of the applicant taken subsequent to the adoption of this chapter (Any action taken by an applicant pursuant to lawfully adopted regulations preceding this chapter will not be considered self-created.)
3. That such variance is the minimum variance that will make possible the reasonable use of the land, building or structure.
4. That the granting of the variance will not be injurious to the neighborhood or otherwise detrimental to the public welfare.
5. That the condition or situation of the specific piece of property, or the intended use of said property, for which the variance is sought is not of so general or recurrent a nature as to make it more reasonable and practical to amend these zoning regulations.

**Or, (Subdivision or Commercial)**

Before any variance use shall be approved, **the Planning Board and City Commission** shall determine that the granting of the variance use will not adversely affect the public interest, health, safety and general welfare; and that the specific requirements are met.

1. Special conditions and circumstances exist which are peculiar to the land, structure or required subdivision improvements involved and which are not applicable to other lands, structures, or required subdivision improvements.
2. A literal interpretation of the provisions of this chapter would deprive the applicant of rights commonly enjoyed by other properties with similar conditions.
3. The special conditions and circumstances do not result from the actions of the applicant.
4. That granting of the variance will not confer on the applicant any special privilege that is denied by this chapter to other lands, structures or required subdivision improvements under similar conditions. No pre-existing conditions on the neighboring lands which are contrary to this chapter shall be considered grounds for the issuance of the variance.

**Or, Sign Variance**

The Zoning Board of Appeals may grant a variance for signs to exceed the setback, placement and projection from a building restrictions, provided that a person files an application for a variance pursuant to and in accordance with Sec. 1-28(G), (H), (I) of the Unified Land Development Code, subject to any conditions and safeguards that the Zoning Board of Appeals deems in the best interests and for the protection of adjoining private property and/or the public interest.

- A. Auxiliary, exempt, flag, freestanding, off-site, wall signs. The Zoning Board of Appeals shall not grant a variance to the permitted number, maximum height or maximum sign area.
- B. Illumination. The Zoning Board of Appeals shall not grant a variance to any sign illumination regulations.

**Item 4: Boundary Survey and Site Plans**

To establish a clear idea of the property and the events leading up to this Variance request, any and all boundary surveys and site plans for the property in question should be provided. All boundary surveys must be signed and sealed by a State of Florida registered land surveyor.

**Item 5: Utilities Letter**

A written commitment letter from the agency responsible for providing central sewer and water utilities in the City to connect the property to an existing central sewer and water system.

If central sewer and/or water is not available, submission of an approved septic tank and/or well permit from the Department of Health and Rehabilitative Services.

**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:**

**Item 7: The entire submittal package, in PDF format, submitted to [developmentpetitions@northportfl.gov](mailto:developmentpetitions@northportfl.gov)**

Please submit all project related spatial information in a GIS Shapefile or File Geodatabase format on the flash drive 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).

+++++



**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)

**Variance 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

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

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

**Variance Calculation**

Function	Fees	
Commercial	\$975	
Residential	\$575	
Subdivision	\$900	
Landscape	\$750	
<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.

-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

**BILLABLE FEE PAYMENT AGREEMENT**

I/WE agree to pay all the costs associated with processing this application petition. Payment is due within 10 days of receipt of an invoice, and all processing of the petition will stop if payments are not made within 10 days.

Name(s): \_\_\_\_\_

Billing Address: \_\_\_\_\_

Contact Number: \_\_\_\_\_

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

**I understand and agree to the conditions outlined in this agreement, and certify that all the information provided is correct.**

Signature: \_\_\_\_\_

Witness: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Applicants are billed for Legal Advertisement costs and actual postage costs for Adjacent Property Owner notifications. Fees will vary based on size of advertisement selected by the local newspaper, and amount of property owners to be notified.**

**To be filled out by Planning Staff**  
**Petition Number: VAR - \_\_\_ - \_\_\_\_\_**

# 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