

DETERMINATION OF NONCONFORMITY APPLICATION INFORMATION PACKET

Applications cannot be accepted without an appointment.

**Call (813) 277-1630
to schedule an appointment to file an application.**

**Incomplete applications cannot be accepted.
Please read the instructions and use the attached checklist.**

**The Land Development Code allows up to 30 business days for
processing and review of administrative applications.**



**Hillsborough County
Florida**

**THE HILLSBOROUGH COUNTY BOARD OF COUNTY COMMISSIONERS
ADOPTED LOBBYING ORDINANCE NO. 93-8, AS AMENDED. PRIOR TO
MEETING PRIVATELY WITH A BOARD MEMBER, COUNTY ATTORNEY,
CHIEF ASSISTANT COUNTY ATTORNEY, COUNTY ADMINISTRATOR, ANY
ASSISTANT COUNTY ADMINISTRATOR, OR ANY DEPARTMENT HEAD,
YOU MAY BE REQUIRED TO REGISTER AS A LOBBYIST.**

**HILLSBOROUGH COUNTY PLANNING & GROWTH MANAGEMENT
APPLICATION FORM**

Shaded Area For Official Use Only

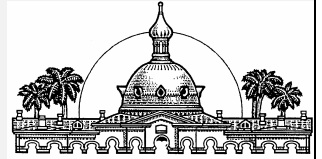
APPLICATION PREFIX AND NUMBER: _____ - _____ - _____

HEARING(S) AND TYPE: DATE: _____ TYPE: _____
(If Applicable)

DATE: _____ TYPE: _____

RECEIPT NUMBER: _____

APPLICATION TYPE AS REFERENCED IN LDC: _____



Hillsborough County
Florida

INTAKE DATE: _____ INTAKE TECHNICIAN SIGNATURE: _____

APPLICANT'S REPRESENTATIVE

Name: _____

Address: _____

City / State / Zip _____ Daytime Phone: (____) _____

E-mail address: _____ Fax Number: (____) _____

APPLICANT

Name: _____

Address: _____

City / State / Zip _____ Daytime Phone: (____) _____

PROPERTY OWNER

Name: _____

Address: _____

City / State / Zip _____ Daytime Phone: (____) _____

PROPERTY ADDRESS OR GENERAL LOCATION: _____

NATURE OF REQUEST: _____

RELATED APPLICATIONS: _____

PROPOSED UTILITIES: PUBLIC WATER ___ PRIVATE WELL ___ PUBLIC WASTEWATER ___ SEPTIC TANK ___

(Additional Information Required On "Property Information Sheet")

I HEREBY SWEAR OR AFFIRM THAT ALL THE INFORMATION PROVIDED IN THE SUBMITTED APPLICATION PACKET IS TRUE AND ACCURATE, TO THE BEST OF MY KNOWLEDGE, AND AUTHORIZE THE REPRESENTATIVE LISTED ABOVE TO ACT ON MY BEHALF ON THIS APPLICATION.

Signature of the Applicant

Type or Print Name

I HEREBY AUTHORIZE THE PROCESSING OF THIS APPLICATION AND RECOGNIZE THAT THE FINAL ACTION TAKEN ON THIS PETITION SHALL BE BINDING TO THE PROPERTY AS WELL AS TO THE CURRENT AND ANY FUTURE OWNERS.

Signature of the Owner(s) – (All Parties on the Deed must Sign)

Type or Print Name

AFFIDAVIT TO AUTHORIZE AGENT

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

(NAME OF ALL PROPERTY OWNERS), being first duly sworn, depose(s) and say(s):

1. That (I am/we are) the owner(s) and record title holder(s) of the following described property, to wit:

ADDRESS OR GENERAL LOCATIONS: _____ Folio No: _____

2. That this property constitutes the property for which a request for a: _____ (NATURE OF REQUEST)
is being applied to the Board of County Commissioners, Hillsborough County.

3. That the undersigned (has/have) appointed _____ as
(his/their) agent(s) to execute any permits or other documents necessary to affect such permit.

4. That this affidavit has been executed to induce Hillsborough County, Florida, to consider and act on the above-described property;

5. That (I/we), the undersigned authority, hereby certify that the foregoing is true and correct.

SIGNED (PROPERTY OWNER)

SIGNED (PROPERTY OWNER)

STATE OF FLORIDA COUNTY OF HILLSBOROUGH The foregoing instrument was acknowledged before me this (DATE) _____ by _____ who: _____ (Property Owner) <input type="checkbox"/> Personally known to me <input type="checkbox"/> Florida driver's license <input type="checkbox"/> Other type of identification: _____ and who: <input type="checkbox"/> did <input type="checkbox"/> did not take an oath. _____ (Signature of Notary taking acknowledgment) _____ Type or Print Name of Notary Public _____ Commission Number Expiration Date	
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STATE OF FLORIDA COUNTY OF HILLSBOROUGH The foregoing instrument was acknowledged before me this (DATE) _____ by _____ who: _____ (Property Owner) <input type="checkbox"/> Personally known to me <input type="checkbox"/> Florida driver's license <input type="checkbox"/> Other type of identification: _____ and who: <input type="checkbox"/> did <input type="checkbox"/> did not take an oath. _____ (Signature of Notary taking acknowledgment) _____ Type or Print Name of Notary Public _____ Commission Number Expiration Date	
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PROPERTY/PROJECT INFORMATION SHEET

Shaded Area For Official Use Only



APPLICATION PREFIX AND NUMBER: _____ - _____ - _____

ADDITIONAL HEARING INFORMATION: CUT-OFF DATE: _____
(If Applicable)

NOTICE DEADLINE: _____

Proposed Project Name (If Applicable): _____

Are Code Enforcement issues pending? _____ If "Yes", list citation numbers _____

List each folio within the proposed project along with the corresponding information for each (Use additional sheets if necessary).

Folio Numbers	Owner(s) Name(s) as listed on the deed	Acreage	Current Zoning*	Comp. Plan Category	S/T/R**
	Total Acreage:				

* If Current Zoning is PD, list PD application number as well.

** Section / Township / Range

DETERMINATIONS OF NONCONFORMITIES

A. General Description

Submittal and review procedures for determinations of nonconformities to current regulations.

B. Cross Reference to Land Development Code

Section 11.03.00.

C. Submittal Requirements

- Fee Payment - as referenced in Section 2.0 of the Development Review Procedures Manual.
- Application - as referenced in Section 3.0 of the Development Review Procedures Manual.
- Deed - copy of current recorded deed.
- Property History Card - copy from Property Appraiser's Office.
- Property Record Printout - copy from Property Appraiser's Office.
- Plot or Site Plan - of sufficient size and indicating the following:
 - boundaries of the non-conforming use site,
 - existing and/or adjacent streets,
 - all buildings and structures on the site and their exact location,
 - any bodies of water on the site,
 - conservation or preservation areas, and
 - easements.
- Notarized Affidavit - concerning the issue to be reviewed.
- Additional Documentation - supplemental information **may** include:
 - a. Residential Reviews
 - copy of a building permit for a single-family dwelling request,
 - copy of a mobile home permit for a mobile home request,
 - copy of a duplex building permit for a duplex request, and
 - copy of the space permits and approved site plan for mobile home park requests.
 - b. Business, Commercial or Industrial Reviews
 - Approved site plan including the following:
 - height and square footage of individual building or structure, and total square footage for all buildings or structures on site,
 - access points, driveways and pedestrian walkways/ bike ways,
 - off-street parking and off-street parking areas (Total **number** and type of parking spaces must be shown),
 - all fences, walls and hedges,
 - copy of a commercial building permit, for a commercial building, and
 - letters from the license issuance office, for commercial business/occupation license(s).

APPLICANT'S AFFIDAVIT FOR A LEGAL NON-CONFORMITY

I, the undersigned applicant for Non-Conforming Use review, do hereby state that the following nonconformity has existed on the site in question since (year) _____. I further state that this nonconformity has existed continuously and has not ceased for more than ninety (90) consecutive calendar days, or a total of one hundred eighty (180) calendar days in any one-year period since the nonconformity was originated.

DETAILS OF NONCONFORMITY:

Signature of Applicant

Printed or Typed Name of Applicant

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH
The foregoing instrument was acknowledged before me this
(DATE) _____
by _____
who: _____ (Property Owner)
 Personally known to me Florida driver's license
 Other type of identification: _____
and who: did did not take an oath.

(Signature of Notary taking acknowledgment)

Type or Print Name of Notary Public

Commission Number Expiration Date

AFFIDAVIT FOR A LEGAL NON-CONFORMITY

I, the undersigned, do hereby state that I am a (Please check one):

- _____ a past or present adjacent property owner, or
- _____ a former owner of, the parcel on which the nonconformity exists, or
- _____ another informed individual (please explain below)

and I further state that I have knowledge that the nonconformity as described below has existed on the site in question since _____. I further state that to the best of my knowledge the nonconformity has existed continuously and has not ceased for more than ninety (90) consecutive calendar days nor for more than one hundred eighty (180) calendar days within any one-year period since the nonconformity was originated.

DETAILS OF NONCONFORMITY:

Signature of Applicant

Printed or Typed Name of Applicant

STATE OF FLORIDA	
COUNTY OF HILLSBOROUGH	
The foregoing instrument was acknowledged before me this	
(DATE)	_____
by	_____
who:	(Property Owner)
<input type="checkbox"/>	Personally known to me
<input type="checkbox"/>	Florida driver's license
<input type="checkbox"/>	Other type of identification: _____
and who:	<input type="checkbox"/> did <input type="checkbox"/> did not take an oath.
_____ (Signature of Notary taking acknowledgment)	
_____ Type or Print Name of Notary Public	
Commission Number	Expiration Date

Checklist of Submittal Requirements for a Determination of Nonconformity

	Applicant Initials	Intake Initials	Requirements
1.	_____	_____	Fee Payment
2.	_____	_____	Application (Included in this packet)
2.a.	_____	_____	Affidavit to Authorize Agent (If applicable)
2.b.	_____	_____	Copy of Recorded Deed(s) (can be obtained in room 114 of the County Courthouse)
3.	_____	_____	Property History Card (can be obtained from the Property Appraisers office on the 16 th floor)
4.	_____	_____	Property Record Printout (can be obtained from the Property Appraisers office on the 16 th floor)
5.	_____	_____	Plot Plan, Survey, or Site Plan
6.	_____	_____	Notarized Affidavit
7.	_____	_____	Applicant’s Affidavit for Legal Non-Conformity (must be notarized) (To be completed by the Applicant/Owner of the subject property)
8.	_____	_____	Affidavit for Legal Non-Conformity (must be notarized) (To be completed by a former owner of the subject property, a current or former adjacent property owner, or another individual familiar with the history of the subject property)
9.	_____	_____	Additional Documentation

