



**CITY OF FORT PIERCE  
COMMUNITY DEVELOPMENT DEPARTMENT  
PLANNING DIVISION**

COMPREHENSIVE PLANNING ♦ DEVELOPMENT REVIEW  
HISTORIC PRESERVATION ♦ URBAN DESIGN ♦ URBAN FORESTRY ♦ ZONING

**APPLICATION FOR CONDITIONAL USE  
WITH NEW CONSTRUCTION**

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

1. Project description: \_\_\_\_\_  
\_\_\_\_\_

2. Property Tax ID \_\_\_\_\_

3. Property address \_\_\_\_\_

4. Zoning District \_\_\_\_\_ 5. Future Land Use \_\_\_\_\_ 6. Total Acreage \_\_\_\_\_

7. Building Height max \_\_\_\_\_ 8. Building (sf) \_\_\_\_\_ 9. Dwelling Units \_\_\_\_\_

10. Historic District (Y/N) \_\_\_\_\_ 11. Lot Coverage (%) \_\_\_\_\_

12. Parking spaces required: \_\_\_\_\_ 13. Parking Spaces proposed: \_\_\_\_\_

14. Name of Owner(s): \_\_\_\_\_

Signature of owner(s): \_\_\_\_\_

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

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Phone # \_\_\_\_\_

15. Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

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

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Phone # \_\_\_\_\_

16. Name of Representative: \_\_\_\_\_

Signature of Representative: \_\_\_\_\_

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

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

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

**Provide 10 Initial Copies of Required Items, folded and collated:**

- 1. Site Plan with traffic statement
- 2. Survey
- 3. Storm Drainage Plan
- 4. Landscape Plan
- 5. Lighting Plan (Photometric Plan or letter from FPUA)
- 6. Elevations
- 7. 1 CD of Plans in JPEG Format

17 copies will be required for Planning Board

12 copies will be required for City Commission

**A meeting with a Planner will be required before any submittals are accepted**

Sec. 22-80 - Authorization of conditional use shall be void after one (1) year unless substantial construction has taken place.

Date Received _____	By _____
Fee of _____ \$500 _____	Receipt Number _____