



# 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 NO NEW CONSTRUCTION

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

1. Project description for which Conditional Use approval is requested. \_\_\_\_\_  
\_\_\_\_\_

2. Property Tax I.D. # \_\_\_\_\_

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

4. Zoning district \_\_\_\_\_

5. Future Land Use \_\_\_\_\_

6. Parking spaces required: \_\_\_\_\_

7. Parking spaces provided: \_\_\_\_\_

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

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

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

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

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

9. Name of Applicant: \_\_\_\_\_

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

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

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

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

10. Name of Representative: \_\_\_\_\_

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

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

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

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

**Provide 8 Initial Copies of Required Items:** Site Plan including parking, fencing, landscaping, etc.;  
Building layout, with sq. ft noted;

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

Date Received _____	By _____
Fee: \$500.00 _____	Receipt Number _____