CITY OF TARPON SPRINGS, FLORIDA Minor Subdivision Application

Return to: Planning & Zoning Department 324 E. Pine Street Tarpon Springs, FL 34689 (727) 942-5611

(Please type or print clearly)

Property Owner(s)								
Name					Email			
Address								
City			Stat	State			Zip	
Phone		Fax	1			Cellula	ır	
Applicant		1						
Name				Email				
Address								
City			State				Zip	
Phone		Fax	ı			Cellular		
Agent (if applicable)		1			ı			
Name					Email			
Address								
City			Stat	te			Zip	
Phone		Fax	ı			Cellula	ır	
General Information		1						
Project Name								
Property Location or Address								
Legal Description (attach addi	tional shee	ets as necessary	/)					
Tax Parcel Number(s)								
Existing Land Use & Zo	oning Inf	formation						
Present Designa	Present Designations of Property			Current Use of Property				
Land Use Category	Zoning D	District						
Site Acreage:	•			•				
Upland	Wetland			Submerged _			TOTAL	
Flood Information: [please check all that apply]								
☐ Zone X		one X Shaded		☐ Zone	AE		☐ Zone VE	
Base Flood Elevation (BF	E): [pleas	se list all elevat	ions]					

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NOTE: Section 162.00 of the Land Development Code provides that the Technical Review Committee (TRC) may approve a "minor subdivision" of an existing lot, tract or parcel into two building sites. Each lot must meet the applicable dimensional requirements of the Land Development Code and must abut a public or private right-of-way for the required minimum lot frontage in the applicable zoning district. Additional right-of-way dedication may be required.

The following MUST be furnished with this application: [incomplete applications will not be accepted]						
	Completed original application with digital copies of all application documents					
	\$250.00 application fee					
	Proof of ownership (warranty deed, title certification, etc.)					
	Property survey, signed and sealed by a professional land surveyor					
	Sketch and legal descriptions of both proposed parcels being created					

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AFFIDAVIT

I (we), the undersigned, certify ow	nership of the property	within this application, that sa	id ownership						
has been fully divulged, whether s	uch ownership by conti	ingent or absolute, and that the	e name of all						
parties to an existing contract for sa	ale or any options are fi	led with this application.							
I (we) certify that	is (a	re) duly designated as the ago	ent(s) for the						
owner, that the agent(s) is (are) a									
herein, whether verbal or written, a	nd appear at any public	hearing(s) involving this petition	on.						
I (we) assent to the City's Comprel that this application must be complete.	• •								
Date:	Title Holder/Property O	wner:							
Date:	ate: Title Holder/Property Owner:								
Date:	Title Holder/Property O	wner:							
Date:	Title Holder/Property O	wner:							
STATE OF FLORIDA)									
COUNTY OF PINELLAS)									
The foregoing instrument was acknowl	edged before me this	day of	, A.D., 20						
byPROPERTY OWNER NAME PRIN	, who is	s personally known to me or who h	as produced						
	as identification and who d	did (did not) take an oath.							
	NOTARY PUBI	LIC							
	Name:								
	Signature:								
	Stamp:								

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