



APPLICATION ADDENDUM
CERTIFICATE OF CONCURRENCY FORM

INSTRUCTIONS

Please complete the form fully and submit with the associated development application, **DIGITALLY** through the Planning and Zoning online application portal (goPost/ePlan). Please attach additional sheets as necessary.

1. TYPE OF DEVELOPMENT ACTIVITY

- ☐ Site Plan for Commercial Development
☐ Site Plan for Residential Development
☐ Final Subdivision Plat
☐ Conditional Use
☐ Other: _____

- ☐ Planned Development:
☐ Residential
☐ Commercial
☐ Industrial

2. GENERAL INFORMATION

PROJECT NAME			
ADDRESS/LOCATION			
TAX PARCEL NUMBER(S)			
LEGAL DESCRIPTION			
SITE ACREAGE			
Upland _____	Wetland _____	Submerged _____	Total _____

3. PROPOSED DEVELOPMENT *(Complete applicable table)*

RESIDENTIAL DEVELOPMENTS	
NUMBER OF UNITS:	
Single-Family:	
Two-Family:	
Multi-Family:	
Mobile Homes:	
Recreational Vehicle Sites:	
Beds (ACLF, ALF, etc.)	

NON-RESIDENTIAL DEVELOPMENTS	
TYPE OF USE(S):	GROSS SQUARE FOOTAGE:



4. LEVEL OF SERVICE IMPACT *(This table must also be included in the site plan set)*

SERVICE TYPE	EXISTING	PROPOSED
POTABLE WATER (GALLONS PER DAY)		
SANITARY SEWER (GALLONS PER DAY)		
SOLID WASTE (TONS PER YEAR)		
TRANSPORTATION ITE CATEGORY: _____	TOTAL TRIPS PER DAY: _____ PEAK HOUR TRIPS: _____	TOTAL TRIPS PER DAY: _____ PEAK HOUR TRIPS: _____
STORMWATER DRAINAGE: <i>Provide separate analysis for review.</i>		

5. ADDITIONAL CONCURRENCY REQUIREMENTS *(if applicable)*

MOBILITY MANAGEMENT

If the proposed development projects is located within deficient road corridors and generate more than 50 new peak hour trips, please provide the following:

- ☐ Transportation Management Plan [[LDC Section 122.11.03](#)]
- ☐ Traffic Study
- ☐ Does Not Apply to Proposed Project

HURRICANE SHELTER

If the proposed development project is a residential development of 50 or more units and involves a site that is wholly or partially located within the Pinellas County Evacuation Zones A, B, or C, please submit the following, consistent with [LDC Section 122.12](#):

- ☐ Hurricane Shelter Impact Analysis
- ☐ Does Not Apply to Proposed Project

6. SIGNATURE(S)/AUTHORIZATION

APPLICANT/PROPERTY OWNER/AGENT SIGNATURE(S):

The information included in and with this form is completely true and correct to the best of my knowledge.

(Applicant's Signature)

(Date)

(Owner's Signature)

(Date)

(Agent's Signature)

(Date)