



City of Stuart
121 SW Flagler Ave
Stuart, FL 34994

Received by: _____
Reviewed by: _____
Approved by: _____

(772) 288-5326

Application for Residential Development Plan

Project ID# _____
(Staff Entry)

Pre-App Conference Date:	Application Date:
Project Name:	
Parcel ID#	Project Address:
Current Zoning:	Current Land Use:
Proposed Zoning:	Proposed Land Use:
Present Use:	Site Area/Acreage:

Fee: *The fees are determined by the valuation of site construction.*

A Residential Development Plan is one which is:

- A. A single-family, duplex or residential tenant finish project of not more than two units. No development of more than two units shall be disaggregated at any time in order to qualify portions of it for “residential development” designation. Subdivisions are specifically excluded from being designated “residential development.”

Submittal Requirements: A completed application form, the payment of fees, a site plan, one (1) copy of all documents on a PDF formatted disc electronically signed and sealed, and any other information as may be required by the City Development Director in order to do a thorough review of the request.

(The data requirements for a site plan are available at the Development Department)

Approving Authority: The Development Director has the administrative authority to approve this application after review by appropriate City staff and, if necessary, the City’s consultants.

Justification: Please provide justification supporting the application and demonstrating how the application:

- (a) is consistent with the relevant components of the City of Stuart Comprehensive Plan including concurrency with adopted levels-of-service for utilities/facilities and compatibility with existing/planned uses and
- (b) complies with the relevant development standards of the City of Stuart Land Development Code *(include additional pages if needed)*.

General Information

(Please Print or Type)

1. Property Owner, Lessee, Contract Purchaser, or Applicant (circle one):

Name:	City/State/Zip Code:
Title:	Telephone Number:
Company:	Facsimile Number:
Company Address:	Email Address (optional):

2. Agent of Record (if any): The following individual is designated as the Agent of Record for the property owner, lessee, or contract purchaser and should receive all correspondence related to the application review.

Name:	City/State/Zip Code:
Title:	Telephone Number:
Company:	Facsimile Number:
Company Address:	Email Address (optional):

3. The Undersigned, as the Property Owner, Lessee, Contract Purchaser, or Applicant (circle one), acknowledges responsibility for all City expenses associated with the referenced application (s) including time spent by the City's consultants and further acknowledges that payment of consultant fees will be made prior to the receipt of the consultant comments.

Name:	City/State/Zip Code:
Title:	Telephone Number:
Company:	Facsimile Number:
Company Address:	Email Address (optional):

I hereby certify that all information contained herein is true and correct.

4. Signed this _____ day of _____, 20____.

Signature of Property Owner, Lessee, Contract Purchaser or Applicant (circle one)

State of Florida, Martin County The foregoing instrument was acknowledged before me on this ____ day of _____ by _____ who is personally known to me, or who has produced _____ as identification and who did/did not take an oath.

Notary Signature

Commission Expires: