

# City of Temple Terrace



## Guide to Special Approval of Use Application and Process

October 2014

## SPECIAL APPROVAL OF USE: PROCEDURE OVERVIEW

A special approval of use may be applied for when a property owner wants to develop or redevelop property for a use that requires a special approval of use according to the City of Temple Terrace Land Development Code. The special approval of use is reviewed and approved based on compliance with specific requirements regarding parking, landscaping, building placement, drainage, access management, etc. for the proposed use. A public hearing is required before the City Council, which makes the final decision. From filing to final decision, the process typically takes a minimum of three (3) months. The planner assigned to your petition will be your main contact person throughout the process.

**Step One**                    The Property Owner/Applicant conducts a Pre-Application Conference with the Community Development Department staff to discuss the proposed project.

**Step Two**                    Property Owner/Applicant submits Special Approval of Use Application and supporting information/documents. Community Development reviews submitted materials and prepares documents for Agency/Committee Reviews.

**Step Three**                    Agency/Committee Review:

- The Hillsborough County Community School Board (reviews and reports on the application for consistency with School Concurrency Regulations) (If Applicable)
- The Hillsborough County City County Planning Commission (reviews and reports on the application for consistency with City of Temple Terrace Comprehensive Plan.)
- The Development Review Committee (comprised of representatives from the various City departments that review and report on the application based on their specific duties and responsibilities)

**Step Four**                    Public notice of the request will be done with a newspaper ad, posting of a sign, and a letter to property owners within 100 feet of the property 10 days prior to the public hearing.

**Step Five**                    The planner assigned to your petition will prepare a staff report for the City Council and schedules a meeting date before City Council. The City Council makes the final decision, taking into consideration the staff reports, and the testimonies of the staff, the petitioner, and the public. The required public hearing will be scheduled during regular City Council meetings, which are held the first and third Tuesday of each month.



## SPECIAL APPROVAL OF USE APPLICATION

Application Number \_\_\_\_\_

Date: \_\_\_\_\_

### Special Approval of Use – Schedule of Fees and Charges

No site plan review required	\$500.00*
Less than 5 acres	\$1,750.00*
5 – 10 acres	\$2,750.00*
10+ acres	\$4,250.00*
	*Plus Advertising Cost

\* Advertising Cost is to pay for the legal advertisement required by Florida Statute in the local newspaper as well as notice to the surrounding property owners. These advertising requirements are performed by the City Clerk and the property owner will be billed separately by that department subsequent to advertising.

Name of Owner: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Name of Applicant: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

NOTE: Please fill out the Authorized Agent Affidavit if the application is being applied for by someone other than the property owner.

### **PROJECT INFORMATION:**

Project Name: \_\_\_\_\_ Address of Property: \_\_\_\_\_

Property Acreage: \_\_\_\_\_ Dimensions: \_\_\_\_\_ Area: \_\_\_\_\_

Proposed date for commencement of development of the property for the proposed use: \_\_\_\_\_

At the Pre-Application Conference, Community Development staff will provide you with the specific conditions of the Special Approval of Use based on your proposed use. Please explain on a separate sheet of paper how your project will comply with these specific conditions.

Please include the following information in the application package:

- Executed Special Approval of Use Application
- Application Fee
- Narrative description of the proposed use (i.e., hours of operation, number of tables, entertainment facilities, etc.)
- Floor plan of the proposed use
- Map or aerial photograph (to scale) showing existing uses of land within two hundred (200) feet of the proposed use
- Written Explanation of Compliance with conditions of the specific use approval
- Authorized Agent Affidavit (if applicable)
- Additional Owner Signature Sheet (if applicable)
- Ten (10) copies of the preliminary site plan in accordance with Section 12-378
- A Transportation Concurrency Application
- Traffic study (if applicable – determined after Transportation Concurrency Application reviewed by staff)
- Landscape Plan and Tree Survey (1:20 scale)
- Boundary Survey

Submittal requests may also require:

- Property Deed with Legal Description. Must be submitted in Microsoft Word format.
- Drainage Calculation and Proof of SWFMD Approval
- School Concurrency Application (for residential projects)
- Other miscellaneous coordination letters (TECO, SWFMD, etc.)

**SIGNATURE OF APPLICANT/OWNER:**

I hereby certify that I am (we are) owner(s) of record of the above described property or I (we) have written permission from the owner(s) of record (copy of authorized agent affidavit attached) to request this action. I hereby certify that the information submitted on this application is true and correct to the best of my knowledge at the time of application.

APPLICANT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/ST/ZIP: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF APPLICANT/OWNER

\_\_\_\_\_  
DATE

NOTE: All persons having a legal or equitable ownership interest in the property must sign the application. Publicly held corporations must provide the name and address of the corporation and principal executive officers.

**ALL OF THE ABOVE INFORMATIONAL ITEMS ARE REQUIRED TO MOVE FORWARD**



**AUTHORIZED AGENT AFFIDAVIT**

I \_\_\_\_\_ (Owner) hereby grant authorization to \_\_\_\_\_ (Authorized Agent) to act in my behalf with the City of Temple Terrace Community Development Department while conducting activities related to obtaining applications or permits. These activities specifically include signing all documents requiring signature of “representative”/”applicant”.

\_\_\_\_\_ (Authorized Agent) is to be considered an agent of my business and therefore the signature of said agent is binding and causes me to assume all responsibilities connected to or associated with the signature as they may relate to my property.

I \_\_\_\_\_ (Owner) relieve the City of Temple Terrace Community Development of, and agree to hold the City of Temple Terrace Community Development Department harmless from, any and all responsibility, claims or other actions arising from or related to the Department’s acceptance of the above agent’s signature for permit/application-related activities. I further understand that it is my sole responsibility to grant and terminate any such authorization and to ensure that the Department receives timely notice of any such grant or termination.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Signature of Agent

**Notary for Owner’s Signature:**

**Notary for Agent’s Signature:**

State of \_\_\_\_\_ County of \_\_\_\_\_

State of \_\_\_\_\_ County of \_\_\_\_\_

The foregoing was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_, who is personally known to me, or who produced \_\_\_\_\_ as identification.

The foregoing was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_ who is personally known to me, or who produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
**Notary Public Signature**

\_\_\_\_\_  
**Notary Public Signature**

\_\_\_\_\_  
Print, Type, or Stamp Name of Notary  
My Commission expires: \_\_\_\_\_

\_\_\_\_\_  
Print, Type, or Stamp Name of Notary  
My Commission expires: \_\_\_\_\_

(SEAL)

(SEAL)



**ADDITIONAL OWNER SIGNATURE SHEET**

Application Number \_\_\_\_\_

I (we), the undersigned, attest and affirm that all representations made in this application are true and accurate to the best of my knowledge.

\_\_\_\_\_  
**Name** *(Please Print)*

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Name** *(Please Print)*

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
\_\_\_\_\_

**STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH**

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me OR has produced \_\_\_\_\_ as identification.

(type of identification produced)

\_\_\_\_\_  
(Notary Public Signature)

Notary Stamp

\_\_\_\_\_  
(print, name of Notary Public)