



City of Longwood Annexation Application

Project Name: _____ Date Submitted: _____

Property Address: _____

Tax ID Number(s): _____
(Available from the Property Appraiser's Office at <http://scpaweb.scpafl.org/v3/>)

Property Acres: _____ Gross Floor Area _____

Current:

Land Use _____ Planning District _____

Proposed:

Future Land Use _____ Planning District _____

Existing Use _____

Proposed Use _____

Owner:

Name: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Applicant:

Name: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

I hereby certify that I have read this application and that the information supplied herein is true and correct to the best of my knowledge. I agree to comply with the current City Codes and Ordinances and County, State and Federal laws regarding land development. I am the property owner, or authorized agent, of the subject property that this petition applies to.

Applicant/Authorized Agent _____

Signature _____ Date _____

Project Number (Completed By Staff)

Intake Staff Person (Completed By Staff)

Project Manager (Completed By Staff)

Application Fee Total

(With Review & Advertising Fee, if applicable)

\$ _____

Fees

Annexation (Single Family) \$200 Application
\$500 Review
\$576 Advertising

Annexation (All Others) \$350 Application
\$500 Review
\$576 Advertising

Submittal Requirements

- Completed, legible application
- Owner(s) Notarized Statement
- Proof of Ownership (Deed)
- Seminole County Lien Verification Letter
- Application Fee Waiver (if applicable)
- The Community Development Services Department may request additional information as necessary if deemed necessary to complete the review of this application.

Meetings

- City Commission First Reading
- City Commission Second Reading and Public Hearing
City Commission Hearings are held on the 1st and 3rd Mondays of each month.

Public Notice

The subject property must have notice posted in at least one conspicuous place on the subject site not less than 10 days prior to the City Commission public hearing meeting.

I understand and agree to the cost recovery requirements in Chapter 59 of Longwood City Code and as described on page 2 of this application.

Initials: _____

Cost Recovery Agreement

By signing this application, the applicant understands and agrees that, pursuant to Longwood City Code Chapter 59, all direct costs, expenses and fees incurred by the city relating directly to the review, processing, inspection, or regulation of an application, including but not limited to the time of city consultants, as well as those relating directly to advertising, surveying, legal and engineering for an application or project shall be assessed to the applicant and reimbursed to the City.

To cover these costs, many applications require a review deposit. However, the applicant is responsible for the full amount of any direct cost, even when the deposit amount is exceeded.

Where applications require after-the-fact invoicing, the City will review the application and invoice the applicant monthly, unless a letter from the applicant is received by the City indicating that the application is being discontinued. Full payment of all fees is a requirement for City’s final approval of the Application.

Following the approval of a permit and the payment of all required fees, or following a written letter from the applicant indicating a discontinuance of the permit application, any remaining balance will be refunded to the applicant, typically within 60 days.”

APPLICANT INITIALS _____

APPLICATION PROCESS

The applicant shall prepare a report to be submitted with this application that thoroughly addresses the following items. These items will be considered as part of the City Commission’s decision and staff’s recommendation for this proposed change.

1. In no event shall an amendment be approved which will result in an adverse community change of the planning area in which the proposed development is located. Describe how the amendment would not result in an adverse community change.
2. Provide a justification for the proposed amendment
3. Section(s) of the Comprehensive Plan to be Amended and proposed language or map changes
4. Provide an analysis as to how the proposed amendment is internally consistent with the Longwood Comprehensive Plan
5. Identify all properties that will be affected by the proposed changes, and prepare a notification letter (to be approved by the City) to all such affected properties. This is in addition to the required adjacent property owner notice. A CAPP meeting may be required depending on the number of affected properties.
6. Please describe how the following factors contributed to this request (if not applicable to this request, put N/A:
 - Changed projections (e.g. regarding public service needs from those on which the text or boundary was based
 - Changed assumptions (e.g. regarding demographic trends)
 - Data errors, including errors in maps
 - New issues
 - Recognition of a need for additional detail or comprehensiveness
 - Data Updates

OWNER STATEMENT
For Annexation and/or Land Use

I _____, owner of the property for which the attached Application is being made to voluntarily annex into the City of Longwood and make all related amendments to the Future Land Use Map designation or to amend the Future Land Use Map designation, do hereby assume all legal responsibility for said Annexation and/or Land Use Map changes.

WITNESSES:

Owner Signature

Date

STATE OF FLORIDA
COUNTY OF SEMINOLE

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared _____, known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he executed the same, and an oath was not taken. (Check one: ____ Said person is personally known to me. ____ Said person provided the following type of identification : _____).

Witness my hand and official seal in the County and State last aforesaid this _____ day of _____, 20__.

Notary Public - State of Florida

Seal:

My Commission Expires: _____