



**CITY OF ORMOND BEACH**

v3.2013

Planning Department

22 South Beach Street, Ormond Beach, FL 32174

Tel: (386) 676-3238

www.ormondbeach.org

comdev@ormondbeach.org

**PUBLIC HEARING- APPLICATION**

*For Planning Department Use*

Application Number

Date Submitted

**APPLICATION TYPE AND FEES**

	<u>Application</u>	<u>Advertising Deposit for Advisory Board</u>	<u>Advertising Deposit for Commission</u>	<u>Total*</u>
<input type="checkbox"/> Annexation				No Fees
<input type="checkbox"/> Annexation Agreement	100	--	--	100
<input type="checkbox"/> Land Development Code (LDC) Amendment	1000	300	300	1600
<input type="checkbox"/> Large-Scale Comprehensive Plan Amendment (Map)	2500	700	1400	4600
<input type="checkbox"/> Official Zoning Map Amendment, 10.01 acres or more	1000	700	1400	3100
<input type="checkbox"/> Official Zoning Map Amendment, 10 acres or less	1000	300	600	1900
<input type="checkbox"/> Planned Development, 10.01 acres or more	2000	800	1500	4300
<input type="checkbox"/> Planned Development, 10 acres or less	2000	300	600	2900
<input checked="" type="checkbox"/> Planned Development Amendment - Major	1000	800	1500	3300
<input type="checkbox"/> Small-Scale Comprehensive Plan Amendment (Map)	2000	400	800	3200
<input type="checkbox"/> Special Exception - New Construction/Redevelopment	850	400	400	1650
<input type="checkbox"/> Special Exception - Downtown CRA Redevelopment	400	400	400	1200
<input type="checkbox"/> Street Vacation	500	--	1500	2000
<input type="checkbox"/> Other	TBD	TBD	TBD	TBD

\* The Land Development Code requires the applicant to pay the full costs of public advertising. The deposit is the average of past applications. Applicants shall receive a refund where costs paid are greater than advertising costs and will be if advertising costs are greater than the deposit paid.

**APPLICANT INFORMATION**

This application is being submitted by  Property Owner  Agent, on behalf of Property Owner\*\*

Name

Full Address

Telephone  Email

\*\* If this application is being submitted by a person other than the property owner, please provide the following Property Owner Information as well as a notarized letter designating you as agent.

**PROPERTY OWNER INFORMATION\*\*\***

Name

Full Address

Telephone  Email

\*\*\*If the property owner does not reside on the property for which the application refers, please provide the following Property Details.

**PROPERTY DETAILS**

Full Address 1521 W. Granada Blvd, Ormond Beach, FL 32174

Legal Description See attached Exhibit A

**PROJECT COORDINATOR**

Name Matthew R. Femal, P.E.

Full Address 655 N. Franklin Street, Suite 150, Tampa, FL 33602

Telephone 813-620-1460

Email matt.femal@kimley-horn.com

**PROJECT INFORMATION**

Name Walmart Liquor Box Addition #613-228

Description Project includes the construction of ~5,002 sf liquor box addition at the northeast corner of the existing building.

**CERTIFICATION**

By submitting this application, I hereby certify that the information provided above is true and correct to the best of my knowledge and that I am aware of the application submittal requirements and review process for this application. I hereby authorize City of Ormond Beach Staff to place legal notice on my property and to take pictures pertaining to my request. I am aware of the required pre-application meeting and am aware that if all the required information is not provided, my application will be continued to the next regularly scheduled hearing.

Signature: *Matthew Femal*

STATE OF FLORIDA  
COUNTY OF Hillsborough

The foregoing instrument was acknowledged before me this 6 day of July, 2017, by Matthew Femal  
as Project Manager (title\*) for Kimley-Horn and Associates, Inc. (name of corporation\*),  
who  provided \_\_\_\_\_ as identification, or  who is personally known to me.

*Vivian D. Reddick*  
Notary Public, State of Florida  
My Commission Expires: 9/27/2019



\* If you are executing this document, please complete the spaces with your title and the name of your company as indicated.