



# City of Destin

Community Development Department

## Planning Division

City of Destin Annex  
4100 Indian Bayou Trail  
Destin, Florida 32541

Phone (850) 837-4242 • Fax (850) 460-2171

[www.cityofdestin.com/index.aspx?nid=91](http://www.cityofdestin.com/index.aspx?nid=91)

## LAND DEVELOPMENT CODE ZONING MAP AMENDMENT

### Does Your Property Meet the Criteria for this Application?

The subject property of the proposed amendment must have a Future Land Use Map Designation consistent with the proposed zoning; if not, then a Future Land Use Map amendment will be required prior to proceeding with amending the Official Zoning Map.

#### 1. CONTACT INFORMATION:

**A. Applicant:** \_\_\_\_\_

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

Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

**B. Property Owner:** \_\_\_\_\_

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

Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

**C. Authorized Agent (if applicable):** \_\_\_\_\_

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

Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

*Note: Owner must complete the attached Agent Affidavit.  
If there is more than one owner, each owner must complete an Agent Affidavit.*

**2. PROPERTY INFORMATION:**

A. Existing Street Address: \_\_\_\_\_

Parcel ID (s): \_\_\_\_\_,  
\_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plat Book: \_\_\_\_\_ Page Number: \_\_\_\_\_

Subdivision: \_\_\_\_\_

B. Existing Zoning District Classification: \_\_\_\_\_ *(To be completed by the City)*

Proposed Zoning District Classification: \_\_\_\_\_

Future Land Use Map Designation: \_\_\_\_\_ *(To be completed by the City)*

C. Existing use of subject property: \_\_\_\_\_

**3. AMENDMENT REQUEST**

A. Explain the basis for your request. Give solid and convincing reason(s) as to why the current zoning district is not appropriate for the property, and why the requested zoning district is more suitable. Indicate the proposed specific use(s) expected to be developed if the proposed zoning district change is granted by City Council.

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

B. Date of pre-application meeting: \_\_\_\_\_

C. Total acreage of the property in the proposed amendment: \_\_\_\_\_

D. Has the property received any waivers, special exceptions or variances?      YES \_\_\_      NO \_\_\_

If you answered “yes” to the above question, please explain – including when approved.

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

**E.** If you are seeking an Official Zoning Map designation of LDR-V, LDR-HI, LDR-H, MDR-V, MDR-HI, ROI-VR, ROI-GD, or ROI-TD, please explain how this designation is consistent with the underlying Future Land Use Map designation.

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**F.** Please explain how the proposed Official Zoning Map designation supports and is consistent with the purpose and intent of the City of Destin Zoning Districts as described in Section 7.12.06. *Zoning Districts* of the Land Development Code.

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**G.** Please identify any allowable uses as listed in Table 7-2: Table of Allowable Uses for the proposed zoning district that should not be allowed in the specific location proposed for the zoning map amendment (will require a Text Amendment to the Land Development Code).

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**H.** Please identify any allowable uses not listed in Table 7-2: Table of Allowable Uses for the proposed zoning district that should be allowed in the specific location proposed for the zoning map amendment (will require a Text Amendment to the Land Development Code).

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**I.** Please explain the fiscal impact of the proposed amendment upon the finances of the City, if any.

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**J.** Please explain the impact of the proposed amendment upon all public facilities, if any.

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**K.** Please explain the impact of the proposed amendment upon the environment, natural and/or historical resources, if any.

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**L.** Please explain the degree of consistency of the proposed amendment with the Comprehensive Plan for the City. (*Applicant may need to refer to the Comprehensive Plan.*)

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**M.** Please explain the impact upon the ability of the City to provide adequate public facilities and maintain the existing level of service for public facilities as identified in the comprehensive plan, if the proposed amendment is granted.

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**N.** Please explain the compatibility of the proposed amendment upon the surrounding neighborhoods and land uses.

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**4. SUBMITTAL REQUIREMENTS FOR AN OFFICIAL ZONING MAP AMENDMENT:**

1. \_\_\_\_\_ Completed application - All applicable areas of the application shall be filled in and submitted to the Community Development Department Planning Division at the City of Destin Annex, 4100 Indian Bayou Trail, Destin, Florida 32541.
2. \_\_\_\_\_ Application Fee: \$1,200.00 – Ordinance Amendment Applications  
(FY2017 Schedule of Fees, Resolution 17-05, adopted 02/22/17, effective 02/23/17)

**Application fee includes First Reviews only. Subsequent Submittal Reviews and all mailing costs will be invoiced to the Applicant; invoices must be paid prior to submittal of additional Submittal Review Packages.**

**Accepted Payments are Cash, Check, MasterCard or Visa. Checks shall be made payable to the City of Destin and submitted to the Planning Division, Community Development Department, City Hall Annex, 4100 Indian Bayou Trail, Destin, Florida 32541**

3. \_\_\_\_\_ Proof of Ownership - A copy of the last recorded deed for the property. The name on the deed must correspond to “Current Owner” of the property. Agent Affidavit/Special Power of Attorney is required if the applicant is someone other than the owner.
4. \_\_\_\_\_ Agent affidavit/Special Power of Attorney (if applicable) - If the applicant is other than the owner of the property under construction for review.

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**NOTE: This application must be filled out completely and must be signed by the owner or his designated agent. If the applicant is different than the owner of the subject property, then an agent affidavit is required from the owner of the property. The agent affidavit must be completely filled out and submitted with this application. If the property has multiple owners, then all owners or their designated agents must sign this application.**

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**I HAVE READ THE INFORMATION IN THIS APPLICATION AND HAVE FILLED IN ALL ANSWERS CORRECTLY TO THE BEST OF MY ABILITY.**

**APPLICANT:**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

**AGENT AFFIDAVIT  
SPECIAL POWER OF ATTORNEY**

KNOWN ALL MEN BY THESE PRESENTS, THAT I, \_\_\_\_\_  
am presently the owner and/or leaseholder at \_\_\_\_\_  
and desiring to execute a Special Power of Attorney, have made, constituted and appointed, and by these presents  
do make, constitute and appoint \_\_\_\_\_  
whose address is \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_,  
my Attorney-in-Fact to act as follows, GIVING AND GRANTING unto said attorney full power to act as my  
agent in any and all matters pertaining to: \_\_\_\_\_.

FURTHER, I do authorize the aforesaid Attorney-in-Fact to perform all necessary acts in the execution of the  
aforesaid authorization with the same validity as I could effect if personally present. Any act or thing lawfully  
done hereunder by the said attorney shall be binding on myself and my heirs, legal and personal representative,  
and assigns.

PROVIDED; however, that any and all transactions conducted hereunder for me or for my account shall be  
transacted in my name, and that all endorsements and instruments executed by the said attorney for the purpose of  
caring out the foregoing powers shall contain my name, followed by that of my said attorney and the designation  
“Attorney-in-Fact.”

OWNER

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
by \_\_\_\_\_.  
(name of person acknowledging)

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
Printed Name of Notary or Seal

Personally known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

**DO NOT SUBMIT INFORMATION BELOW WITH APPLICATION**

**APPLICATION AND HEARING INFORMATION**

**Official Zoning Map Amendment**

The regulations, restrictions, and zoning district boundaries set forth in the land development code may be amended, supplemented, or changed. Proposed changes may be suggested by the City Council, the City Manager or designee, by a single property owner, or by petition of the owners of 51 percent or more of an area involved in the proposed change. Applications for an ordinance or rezoning amendment must be submitted to the Community Development Department. The Community Development Department will then review and forward the application and a staff report with a recommendation for approval, approval with conditions, or denial to the Local Planning Agency (LPA) for its review. The LPA, after a public hearing and due public notice, will then forward its staff report and recommendation to the City Council for approval, approval with conditions, or denial. The City Council shall then approve, approve with conditions, or deny the application. If an application for an ordinance or rezoning amendment is disapproved by the City Council, the applicant shall not reapply for the same ordinance or rezoning amendment for a period of one year from the date of disapproval by the City Council. (Ord. No. 04-23-LC, § 3, 8-16-04)

**A. What Information Do I Need to Submit with My Application?**

The following items **must** be submitted with your application packet:

1. Must have had scheduled and completed a pre-application meeting with the Community Development Director or Comprehensive Planning Manager prior to submitting your application;
2. A complete Official Zoning Map Amendment application;
3. Application Fee: \$1,200.00 – Ordinance Amendment Applications  
(FY2013 Schedule of Fees, Resolution 13-01, adopted 02/19/13, effective 03/01/13)

**This is a one-time, all-inclusive fee. It includes: initial application and resubmittals; and all costs associated with administration, outside consultant reviews, legal notices and mailings.**

4. A complete and notarized Agent Affidavit (if the applicant is not the owner). Agent Affidavit's must be provided from all owners of the subject property;
5. A signed and sealed survey of the subject property, which includes the legal description and the exact acreage of the proposed amendment (not dated older than 9 months);
6. A copy of the warranty deed, previous year's tax receipt, or property record card for the subject property; and
7. A general location map of the subject property in relation to the City limits.

## **A. Hearing and Application Submittal Dates**

Official Zoning Map Amendment Applications are reviewed ~~only twice a year~~ by the Local Planning Agency:

1. ~~First Thursday in March (Spring Cycle)~~
2. ~~First Thursday in August (Fall Cycle)~~

Submittal deadlines are 60 calendar days prior to hearing date. Failure to provide a complete application and all required items in a timely manner will delay your hearing date. Submit applications to the Community Development Department at the City of Destin Annex, 4100 Indian Bayou Trail, Destin FL 32541.

## **B. Preparing for Your Public Hearing**

A public hearing before the Local Planning Agency is required for any proposed amendment to the City's Land Development Code. The Local Planning Agency will forward the proposed amendment to the Destin City Council with a recommendation of approval or denial for a first reading.

Upon reaching the Council, the amendment must be approved on first reading in order for it to be heard on second reading. The Council may 1) officially adopt the amendment on second reading; 2) require changes, or 3) deny approval of the amendment. You will be advised of the date and time of the all hearings by mail. If the Council denies the amendment, then you have thirty (30) days to file an appeal with Circuit Court of Okaloosa County.

You must appear at the public hearings or be represented by an authorized agent or attorney in order for action to take place on your application. Any representative you designate must have completed Agent Affidavit form, which is available at the Community Development Department. If the owner or representative fails to appear at the hearing(s), without first providing a written notice to the City, the application will be tabled until the next available hearing date.

It is your responsibility to fully research and know any and all laws that may be applicable and affect the outcome of any decision on your application request. The City assumes no responsibility or liability relating to your failure to research and know all applicable laws including, but not limited to state, federal, and city laws including the city code, land development regulations, and the comprehensive plan. The City recommends that all applicants consider consulting an attorney regarding their application. Furthermore, you are encouraged to review, or copy, the Quasi-Judicial rules and procedures used by the Land Planning Agency prior to the public hearing.

## **C. Additional Information**

Applicants are encouraged to seek a pre-application conference with the Community Development Director to discuss the content and format of the Official Zoning Map Amendment application. Acceptance of the application for amendment to the Official Zoning Map should not be construed as staff support for the amendment request. Please contact the Planning Manager at the phone number listed on the front page to schedule an appointment.

Approval of an Official Zoning Map Amendment does not guarantee and/or entitle the applicant/owner to any type of development permit.