



City of Destin

Community Development Department

Planning Division

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

Phone (850) 654-1119 • Fax (850) 460-2171

APPLICATION

 MAJOR MINOR DEVIATION - DEVELOPMENT

 - - SP

(project number assigned by planning staff)

All applications must be emailed or shared with planning@cityofdestin.com.

Name & Project Number of the Previously Approved Development to which this deviation will apply:

I. CONTACT INFORMATION:

A. **Owner(s):** _____

Mailing Address: _____

Business Phone: _____ Cell: _____

Email: _____

B. **Authorized Agent (if applicable):** _____

Mailing Address: _____

Business Phone: _____ Cell: _____

Email: _____

C. **Engineer:** _____

Mailing Address: _____

Business Phone: _____ Cell: _____

Email: _____

D. Architect: _____

Mailing Address: _____

Business Phone: _____ Cell: _____

Email: _____

E. Surveyor: _____

Mailing Address: _____

Business Phone: _____ Cell: _____

Email: _____

II. PROPERTY INFORMATION:

Existing Street Address: _____

Parcel ID (s): _____,
_____, _____

Lot: _____ Block: _____ Plat Book: _____ Page Number: _____

Subdivision: _____

III. PROJECT INFORMATION:

A. General Information (brief project description of which this application is seeking approval):

Future Land Use Map Designation(s) of the Property: _____

Zoning District(s) of the Property: _____

Type of Project / Proposed Land Use of the Property: _____

Total Acreage and Square Footage of the Property: _____

Number of Permanent or Long-term Residential Units: _____

Number of Seasonal or Short-term Residential Units: _____

Total Number of Units Proposed: _____

Number of Units per Acre Allowed: _____

Number of Units per Acre Proposed: _____

Proposed Building Height (Comprehensive Plan 2020 - Policy 1-2.1.4): _____

Number of Proposed Stories (included parking decks above grade): _____

Gross Floor Area of Proposed Structure: _____
(Chapter 1 of the Comprehensive Plan: 2020 definition and Article 3, Sec. 3.00.00 "Gross Floor Area" of the Destin Land Development Code)

(NOTE: Calculations from the Site Plan and Architectural Floor Plan must match.)

B. White Sands Zone: The project is located in (check one):

White Sands Zone I: ____ White Sands Zone II: ____ Outside White Sands Zones: ____

C. Existing or Proposed Conditional Uses, Variances, Administrative Appeals, etc:

Yes: ____ **(Provide a copy of Final Order)** No: ____

D. Development Intensity - Floor Area Ratio (FAR):

This entire section must be completed for all non-residential projects that have the following Future Land Use Map (FLUM) Designations (Comprehensive Plan: 2020, Policy 1-2.1.2): CBN, CL, CG, CTS, ROI, CBR, TCMU, CMU, SHMU, NHMU, GRMU, HIMU, IN, A, INST, REC, and CON.

Formula:

Square footage of the subject parcel (_____ acre(s) x 43,560 sq. ft.): _____

Multiplied by FAR allowed in the Future Land Use Map Designation: X _____

Non-residential structure (not including above-grade parking structure) FAR Calculation:
(described in Policy 1-2.1.2, Comprehensive Plan: 2020)

a). Sum of Gross Floor Area (square feet) all existing and proposed structures: _____
(The gross floor area shall not include public parking structures or portions of parking structures dedicated to the public and shall adhere to Chapter 1 of the Comprehensive Plan: 2020 definition and Article 3, Sec. 3.00.00 "Gross Floor Area" of the Destin Land Development Code.)

b). Divide result of item "a" above by the gross site area (square feet): _____

Compliance:

FAR allowed in the Future Land Use Map Designation: _____

FAR proposed for this project (Insert figure from item "b"): _____

The proposed project FAR (____ is , ____ is not) in compliance.

Formula for above-grade parking structures:

Square footage of the subject parcel: (_____ acre(s) x 43,560 sq. ft.) _____

Multiplied by 0.50 bonus FAR allowed in ONLY NHMU, SHMU, and TCMU Future Land Use Map Designations: _____

Maximum above-grade parking structure square footage allowed: _____

Above-grade parking structure FAR Calculation (described in Policy 1-2.1.2, Comprehensive Plan: 2020):

a). Sum of Gross Floor Area (square feet): _____
(all existing and proposed above-grade parking structures)

b). Divide result of item "a" above by the gross site area (square feet): _____

Compliance for above-grade parking structures:

FAR allowed in the NHMU, SHMU, and TCMU Future Land Use Map Designations: 0.50

FAR proposed for this project (Insert figure from item "b"): _____

The proposed project FAR (___ is , ___ is not) in compliance.

E. Airport Protection:

FAA Permit Required: ___ Permit Attached: ___

Does the Proposed Project Lie within the Airport Noise Zone: Yes___ No___

If yes, requires disclosure statement and increased construction standards. For residential projects, requires a disclosure statement on the mylar of subdivision and at time of sale (Article III, Airport Zoning Regulations, Section 212-155 of Land Development Code).

Does the Proposed Project Lie within Airport Clear Zone: Yes___ No___

Does the Proposed Project Lie within Airport Expansion Area: Yes___ No___

If Yes, attach statement from Okaloosa County of Airport Authority of "approval" or "no objection" to encroachment within the proposed expansion area.

Construction Crane Registration Form Required: ___ Approved Form Attached: ___

Does the Proposed Development Site Include the following (Insert "Yes" or "No" in every blank and include those with a "Yes" on the Plans):

- | | |
|--|--------------------------------------|
| _____ Multimodal District and Design Initiatives | _____ Within Harbor CRA District |
| _____ Within Town Center CRA District | _____ 100-Year Flood Plains |
| _____ Waterfront Property | _____ Conservation Areas |
| _____ Seaward of (Within) a V-Zone | _____ Environmentally Sensitive Area |
| _____ Seaward of the CCCL | _____ Historic Landmarks |
| _____ Protected Dunes | _____ In a Historic District |
| _____ Protected/Unique Vegetation | _____ Archeological Sites |
| _____ Seaward of Shoreline Protection Zone | _____ Habitat of Threatened Species |

_____ Preserved Trees (24" d.b.h. and over)
_____ Protected Trees (12" d.b.h. and over)

_____ Habitat of Endangered Species
_____ Within 200 Feet of a Potable Water Well

If in a Flood Zone, give Minimum Base Flood Elevation Required: _____ Provided: _____

IV. SUBMITTAL REQUIREMENTS

- A. 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.
- B. Agent Affidavit (if applicable) – Required if the applicant is other than the property owner.
- C. Application Fee: [Fee Schedule](#)
(FY2019 Schedule of Fees, Resolution 19-11, adopted 08/05/2019)

Application fee includes First Submittal 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.

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

- D. Proof of Ownership – A copy of the last recorded deed of the property. Owner on deed must correspond to “Current Owner” identified on page 1.
- E. Concurrency Evaluation Certificates (CEC’s) – The following must be provided:
1. Solid Waste
 2. Sanitary Sewer (must submit completed questionnaire to DWU)
 3. Potable Water (must submit completed questionnaire to DWU)
 4. Traffic plus analysis (**3 sets signed and sealed**)
 5. Stormwater Management plus calculations (**2 sets signed and sealed**)
 6. DWU Service Questionnaire

The applicant is responsible for returning each CEC to the Community Development Department, completed, approved and signed.

- F. Approval from Okaloosa County Airport Authority (if applicable) - This applies to projects that lie within airport expansion area as defined in Article 7, Section 7.15.00 of the Land Development Code.
- G. Plans Requirements (LDC Section 2.18.02) – Including, but not limited to the following:
1. Cover Sheet
 2. Boundary Survey, which includes the following:
 - ✓ Signed and Sealed by Registered Surveyor
 - ✓ No older than six months unless Engineer of Record certifies site has NOT changed
 - ✓ Existing Conditions of site, which includes trees over 12” in diameter at breast height
 - ✓ Delineated Topography
 3. Demolition Plan (if applicable)
 4. Site Plan
 5. Drainage Plan – Calculations must be signed & sealed by a Registered Florida Engineer

and meet the requirements of Destin Code of Ordinances, Sections 6-346 and 6-352.

6. Utility Plan
7. Landscape Plan and Supporting Plans
8. Outdoor Lighting Plan
9. Detail Sheets
10. Architectural Elevations with height shown (North, South, East, and West)
11. General Architectural Floor Plans (all floors) with gross floor area calculated

H. Other Required Plans

1. Construction Vehicle Parking Mitigation Plan (LDC Section 7.01.02.E)
For non-residential and multi-family residential construction
2. Dust Control Plan (LDC Section 11.10.03)
3. Vibration Impact Mitigation Plan (LDC Section 7.02.03)

I. Checklists – The Development Checklist is **REQUIRED**.

V. SUBMITTAL PACKAGE QUANTITIES:

A. ONE (1) COMPLETE DIGITAL package of PDF files emailed or shared with planning@cityofdestin.com

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.

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 by means of physical presence ___ or online notarization __, this ___ day of _____, 20____,

By: _____
(Print name)

Personally known ____ OR Produced Identification _____

Notary Signature Seal: