Engineering Services Department
Development Services Division
Planning~Building~Inspections

105 Miracle Strip Pkwy. SW
Fort Walton Beach, FL 32548
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APPLICATION FOR MINOR AMENDMENT TO DEVELOPMENT ORDER

PROJECT NAME AND DATE OF ORIGINAL APPROVAL:	
ADDRESS OR GENERAL LOCATION:	

Applicant (Owner or Agent) NAME:	
ADDRESS:	
PHONE:	
EMAIL:	
Property Owner NAME:	
Property Owner ADDRESS:	
Tax Parcel ID Number:	

Zoning District:	☐ R-1 ☐ R-1E ☐ R-2 ☐ YC ☐ MX-1 ☐ REC ☐ MX-2 ☐ MB ☐ CTP ☐ CF ☐ CG ☐ PUD
Future Land Use Map Designation:	☐ LDR ☐ MDR ☐ MU ☐ COM ☐ MBI ☐ IND ☐ CIU ☐ REC ☐ CNS ☐ PC

Proposed Use: (i.e. restaurant, clothing, sales, manufacturing, apartments, etc.)	
Project Type:	☐ New Build ☐ Addition ☐ Renovation
Site Size:	

Provide detailed description of the proposed deviation from the approved Site Plan:

Total Floor Area (sq.ft.):	
Ground Floor Area only (sq.ft.):	
Landscaped Area (% or sq.ft.):	
# of residential units proposed:	
Maximum Building Height:	

Setbacks Provided:			
Front:		Rear:	
Interior Side:		Corner Side:	

Parking Spaces Provided:	
Regular:	
ADA- accessible:	
TOTAL:	

OWNER'S CONSENT AND DESIGNATION OF AGENCY

I, _____, the fee simple owner of the following described property (give legal description):

hereby petition to the City of Fort Walton Beach for *"amendment to existing site development approval"* by the City on _____ and affirm that _____ is hereby designated to act as agent on my behalf to accomplish the above.

I certify that I have examined the application and that all statements and diagrams submitted are true and accurate to the best of my knowledge. Further, I under stand this application; attachments and fees become part of the official records of the City of Fort Walton Beach, Florida, and are not returnable.

_____

(Owner's Signature)

The foregoing instrument was acknowledged before me this _____ day of _____, 20 _____by _____, who is personally known to me or has produced _____ as Identification and who did take an oath.

_____ _____

(Printed Name of Notary Public) (Signature of Notary Public)

Commission # _____. My commission expires _____.

(Notary's Seal)