

# Town of Dundee

• 135 Main Street • PO Box 1000 • Dundee, Florida 33838 • (863) 419~3100 • Fax (863) 419~3105

# Application for Planned Unit Development (PUD) Zoning and Master <u>Development Plan Approval</u> (FORM 0204)

#### **Applicant**

The following information is required for submission of an application for a Planned Unit Development (PUD) zoning district and Master Development Plan for the Town limits of Dundee, Florida. Please print or type the required information below. Attach three copies of the current survey of subject property along with an aerial photograph and location map.

| Name of Property O                          | wner:  |   |
|---|--|---|
| Mailing Address:                            |  | Phone:  |
| Name of Representa                          | ative, if applicable:  |   |
| Mailing Address:                            |  | Phone:  |
| Reason for Request                          | ·<br>·   |   |
|   | Property Ide   | ntification_  |
| Property Address or                         | General Location:  |   |
| Present Use of the F                        | Property:  |   |
| Existing Structures L                       | ocated on the Site:  |   |
| Total Acreage: Number of Residents on Site: |  |   |
|   |  |   |
| Legal Description of                        | the Property:  |   |
| Range:                                      | Township:  | Section:  |
| Subdivision:                                |  |   |
|   | Planning and Zon   |   |
| Current City Future                         | Land Use Designation:  |   |
| Current City Zoning                         | Classification:  |   |
|   | will be assessed on all requests for<br>undee Town Council establishing sucl | land use and zoning changes in accordance with the most nifees. |
| Date Received:                              | Received By:   | File #:   |
| Amount Paid:                                | Check #:   | Receipt #:  |

## **OWNER'S SIGNATURE PAGE**

| (I) (IM )                                  |  |
|--|--|
| (I) (We),                                  | being  |
|  | ve) own one or more of the properties involved in this       |
|  | Town of Dundee to process this petition for Re-zoning        |
| •  | ent, in accordance with all adopted Town rules and           |
| regulations, and in conformance with St    | ate law.   |
| Further (I) (we) or any agent or lessee of | of the subject property authorized by (me) (us) to file this |
| petition, deposes and say that the state   | ments and answers contained in the application and any       |
| information attached thereto, present th   | e arguments in behalf of this petition to the best of (my)   |
| (our) ability; and that the statements ar  | nd information referred to above are in all respects true    |
| and correct to the best of (my) (our) kno  | owledge and belief.  |
|  | _  |
| <u>OWNERS</u>                              |  |
|  |  |
|  |  |
| Signature of Owner                         | Signature of Owner   |
| Printed Name of Owner                      | Printed Name of Owner  |
|  |  |
| Signature of Owner                         | Signature of Owner   |
| Printed Name of Owner                      | Printed Name of Owner  |
|  |  |
|  |  |
| STATE OF FLORIDA<br>COUNTY OF POLK         | OWNER'S NOTARIZATION   |
|  | cknowledged before me this day of                            |
| • •  | , who is   |
|  | duced a driver's license as identification and who did not   |
| take an oath.                              | adod a anvoi o noonoo ao idonanoanon and wilo did hol        |
| tano an oath.                              |  |
|  |  |

Notary Public Notarial Seal and Commission Expiration Date

### AGENT, LESSEE, OR BUYER'S SIGNATURE PAGE

| (I) (We),                                     | being   |
|---|---|
|   | rve as for the owner(s)                               |
|   | (agent or lessee)                                     |
| in making this petition and that the owner    | (s) (has) (have) authorized (me) (us) to act in this  |
| capacity.                                     |   |
| Further, (I) (we) depose and say that the s   | statements and answers herein contained and other     |
| information attached hereto present the arc   | guments in behalf of the petition herein requested to |
| ·   | atements and information above referred to are in all |
| respects true and correct to the best of (my) |   |
|   |   |
| AGENT, LESSEE, OR BUYER(S)                    |   |
|   |   |
|   |   |
| Signature of Agent, Lessee, or Buyer(s)       | Signature of Agent, Lessee, or Buyer(s)               |
| Printed Name of Agent, Lessee, or Buyer(s)    | Printed Name of Agent, Lessee, or Buyer(s)            |
|   |   |
| Signature of Agent, Lessee, or Buyer(s)       | Signature of Agent, Lessee, or Buyer(s)               |
| Printed Name of Agent, Lessee, or Buyer(s)    | Printed Name of Agent, Lessee, or Buyer(s)            |
|   |   |
| STATE OF FLORIDA                              | AGENT, LESSEE, OR BUYER(S) NOTARIZATION               |
| COUNTY OF POLK                                |   |
| The foregoing instrument was ackn             | owledged before me this day of,                       |
| 20, by  | , who is personally known                             |
| to me or who has produced a driver's licens   | e as identification and who did not take an oath.     |
|   |   |
|   | Notary Public   |
|   | Notarial Seal and Commission Expiration Date          |