



City of Marco Island  
Growth Management Department  
50 Bald Eagle Drive  
Marco Island, FL 34145  
Phone: 239-389-5000 or FAX: 239-393-0266

**SDP SITE DEVELOPMENT PLAN APPLICATION**

Petition number: **SDP-** \_\_\_\_\_ Date Received: \_\_\_\_\_

Planner: \_\_\_\_\_

**ABOVE TO BE COMPLETED BY STAFF**

- Site Development Plan Review (See Section 30-674 for requirements)
- Site Improvement Plan Review (See Section 30-677 for requirements)
- Site Development Plan Amendment Review (See Section 30-676 for requirements)
- Site Development Plan Third and Subsequent Review
- Site Development Plan Time Extension

Agent's Name: \_\_\_\_\_

Agent's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Owner(s): \_\_\_\_\_

Owner's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Project Address: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

If this project is located in a PUD or it has a Conditional Use or a Variance approved, please indicate the PUD name and/or CU or Variance Application.

Number: \_\_\_\_\_ Date Approved: \_\_\_\_\_

LOCATION: Section: \_\_\_\_\_ Twnshp: \_\_\_\_\_ Range: \_\_\_\_\_  
Unit: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Property I.D. #: \_\_\_\_\_ Existing Zoning: \_\_\_\_\_

Type of development proposed: \_\_\_\_\_ Size (acreage) of the project: \_\_\_\_\_

No. of Dwelling Units: \_\_\_\_\_ Commercial Square Footage: \_\_\_\_\_

**ADJACENT ZONING AND LAND USE:**

Property	Zoning	Land Use
Subject	_____	_____
N	_____	_____
S	_____	_____
E	_____	_____
W	_____	_____

I hereby submit and certify the application to be complete and accurate.

\_\_\_\_\_  
Signature of Agent

\_\_\_\_\_  
Date

**SDP, SIP AND SDPA FEE CALCULATION = BASE FEE \$5,000.00 PLUS:**

RESIDENTIAL: \$40.00 per unit:

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

NON-RESIDENTIAL: \$.05 per gross square foot of building:

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

SITE CLEARING PLAN REVIEW FEE: \$300.00 for 1<sup>st</sup> acre, \$100.00 per additional acre or fraction of an acre (max \$900):

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

SITE DEVELOPMENT PLANS: (3<sup>RD</sup> and subsequent reviews) \$500.00

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

SITE DEVELOPMENT PLAN TIME EXTENSION: \$250.00

\_\_\_\_\_

Additional information or corrections that will be required for formal submittals:

---

---

---

Total Fees required for submittal: \_\_\_\_\_

On March 7th, 2016 city council approved a resolution revising the fees related to development plan review and established cost recovery fees (resolution 16-24).

All development plan review applications will require an additional fee of 2 ( two ) times the total application fee due prior to advertising for public hearing, the additional fee will cover advertising, attorney fees and other miscellaneous costs associated with your applications, any monies not used will be returned to the applicant.

---

**SITE DEVELOPMENT PLAN  
APPLICATION SUBMITTAL CHECKLIST**

*This completed checklist is to be submitted with application packet*

REQUIREMENTS	# OF COPIES REQUIRED
Completed Application	1
Completed Owner/Agent affidavit, signed and notarized	1
Pre-application notes/minutes	1
Site Plan	1  (please include 7 copies of any documentation in color or larger than 24x36 to be handed out at the Planning Board and City Council meetings)
TOTAL FEES	Application fee, check shall be made payable to "The City of Marco Island" in the amount  of: _____

As the authorized agent/applicant for this petition, I attest that all of the information indicated on this checklist is included in this submittal package. I understand that failure to include all necessary submittal information may result in the delay of processing this petition.

\_\_\_\_\_  
Signature of Petitioner or Agent

\_\_\_\_\_  
Date

**AFFIDAVIT**

We/I, \_\_\_\_\_ being first duly sworn, depose and say that we/I am/are the owners of the property described herein and which is the subject matter of the proposed hearing; that all the answers to the questions in this application, including the disclosure of interest information, all sketches, data, and other supplementary matter attached to and made a part of this application, are honest and true to the best of our knowledge and belief. We/I understand that the information requested on this application must be complete and accurate and that the content of this form, whether computer generated or City printed shall not be altered. We/I hereby also consent to access to the subject property (excluding entering any home or other enclosed structure) by City of Marco Island staff members for the limited purpose of evaluating, observing, or understanding the subject property conditions as they relate to the Site Development Plan. While the Site Development Plan is pending, Staff members will be allowed access upon the property provided they display a Marco Island City Photo ID or a Valid Driver's License.

As property owner we/I further authorize \_\_\_\_\_ to act as our/my representative in any matters regarding this Petition.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Printed Name of Property Owner

\_\_\_\_\_  
Printed Name of Property Owner

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me or has produced \_\_\_\_\_ As identification.

State of Florida  
County of \_\_\_\_\_

\_\_\_\_\_  
Signature, Notary Public – State of Florida

(Seal)

\_\_\_\_\_  
Printed, Typed, or Stamped Name of Notary