



CONDITIONAL USE/SPECIAL EXCEPTION APPLICATION

City of New Port Richey
Development Department
City Hall, 5919 Main Street, 1st Floor
New Port Richey, FL 34652
Phone (727) 853-1039 Fax (727) 853-1052

CASE # _____
 Special Exception Application
 Conditional Use Application
Date Received _____

- Submit original signed and notarized application
- Submit three total sets of information (one original, two copies; stapled application, collated and folded surveys/site plan, etc.)
- Submit application fee \$350 (check made payable to the *City of New Port Richey*)

PROPERTY OWNERS AND REPRESENTATIVE INFORMATION:

Current Property Owner(s): _____

Mailing Address: _____

(Street, City, State, Zip Code for all owners)

Daytime Phone Number: _____ Fax Number: _____

Email or Alternate Contact Information: _____

Representative(s) of Owner(s): _____

Relationship to Owner(s): _____

Mailing Address: _____

(Street, City, State, Zip Code)

Daytime Phone Number: _____ Fax Number: _____

Email or Alternate Contact Information: _____

Who is the PRIMARY contact for this application? _____

PROPERTY INFORMATION:

- Provide survey and/or site plan of property with dimensions and to scale

Street Address: _____

General Location: _____

Size of Site: _____ square feet _____ acres

Legal Description: _____

Parcel Number(s): _____

Existing Categories: Zoning District: _____ Land Use Category _____

Existing Use and Size: _____

(Existing number of dwelling units or square footage of non-residential use on the property)

Proposed Use: _____

(Provide details about specific use requested)

ADDITIONAL INFORMATION: *(as applicable)*

Hours of Operation: _____
Days of Operation: _____
Maximum Number of Employees on Site at One Time: _____
Proposed Location of Parking for Employees and Patrons: : _____
Additional Information may be requested by the Development Review Committee

GUIDELINES FOR GRANTING CONDITIONAL USE/SPECIAL EXCEPTION: The following criteria shall be addressed. City Council is not bound to grant a conditional use or special exception simply because a request is made. It must find that the use will not adversely affect the public interest. ***(Please fill in blanks with complete responses.)***

1. That this conditional use/special exception is specifically permitted in the zoning district regulation:

2. That the granting of this conditional use/special exception, will not adversely affect the public health, safety or welfare of the community

3. The granting of this conditional use/special exception is consistent with the intent of the zoning district:

4. That the requirements of the district in which the use is to be located shall be complied with

5. That excessive traffic will not be generated on residential streets:

6. That the proposed use will not adversely affect the residential character of existing neighborhoods:

7. That a vehicular or traffic problem will not be created:

NOTE FOR QUASI-JUDICIAL PROCEEDINGS:

I understand the hearing process to review this application is considered quasi-judicial and operates much like a court of law. The Land Development Review Board and City Council members act in a similar capacity as a judge and must govern themselves in accordance with the basics of due process in making decisions. I understand that contact with any of these members about my application should be avoided. I also understand these members have been instructed to avoid all such conversations with applicants or people in opposition to or support of any variance. I further understand that decisions will be made based on evidence and testimony that is presented at scheduled public hearings and not on information gathered outside of these hearings.

CONSISTENCY WITH CONCURRENCY: The following calculations shall be used to **determine the projected demand** of the proposed project on the applicable public facility/service. The calculations are listed by facility/service type. (*Please fill in blanks.*)

Potable water - Adopted level of service (LOS) = 152 gal/day/capita
(nonresidential uses are included in the adopted LOS).

Residential: Single-family: 152 gal × 2.12 persons/household × _____ units = _____ gal/day/capita (demand)
Multi-family: 152 gal × 1.90 persons/household × _____ units = _____ gal/day/capita (demand)

Commercial: See Table I below from the Land Development Code for estimated water/sewage flows.

Wastewater - Adopted level of service (LOS) = 114 gal/day/capita
(nonresidential uses are included in the adopted LOS).

Residential: Single-family: 114 gal × 2.12 persons/household × _____ units = _____ gal/day/capita (demand)
Multi-family: 114 gal × 1.90 persons/household × _____ units = _____ gal/day/capita (demand)

Commercial: See Table I below from the Land Development Code for estimated water/sewage flows.

Solid waste - Adopted level of service (LOS) = 6.3 lbs/day/capita
(nonresidential uses are included in the adopted LOS).

Residential: Single-family: 6.3 lbs × 2.12 persons/household × _____ units = _____ bs/day/capita (demand)
Multi-family: 6.3 lbs × 1.90 persons/household × _____ units = _____ bs/day/capita (demand)

Commercial: See Table I below from the Land Development Code for estimated water/sewage flows.

Recreation/open space: Refer to the New Port Richey Comprehensive Plan for adopted level of service standards.

Single-family: _____ units × 2.12 persons/household = _____ (population projection)
Multi-family: _____ units × 1.90 persons/household = _____ (population projection)

Sites over five acres in area and zoned MF-30 District shall provide five percent of the total net acreage of the development for recreational purposes. Refer to Section 7.06.07 of the Land Development Code.

Stormwater Management. Refer to the Stormwater Management and Erosion Control Policy and Procedures Manual for standards necessary to comply: LOS = 25-year, 24-hour storm event.

Transportation. Refer to the New Port Richey Comprehensive Plan for the adopted Level of Service Standards. Refer to the Land Development Code for the **requirements of a Transportation Study.**

1. Determine the number of trips generated by the proposed project during the p.m. peak hour using the most recent edition of the ITE "Trip Generation" report with no adjustments for internal capture or passerby trips.
2. If the total number of trips is equal to or greater than 50 trips, then a transportation study shall be done. The report shall be signed and/or sealed by either a registered professional engineer or a member of the American Institute of Certified Planners.
 - a. If no study is required, the applicant is required to provide only the existing directional p.m. peak hour traffic volumes and level of service for the roadways link to which project driveways connect. This information shall include project traffic.
 - b. The data shall be in conformance with Notes 3a and 3b of "Existing Conditions" contained in the Land Development Code.
3.
 - a. Existing directional p.m. peak hour traffic volumes and LOS on all existing collectors/arterials in study area.
 - b. Existing turning movement volumes at the impacted intersection(s) and intersection LOS.

SUBMITTAL REQUIREMENTS: *Please submit three collated, stapled, folded sets of the following information:*

SURVEY (not to exceed 24" x 36")

_____ Current survey that identifies the dimensions, area and location of the property prepared, signed and sealed by a land surveyor currently registered in the State of Florida

SITE PLAN with the following information (not to exceed 24" x 36")

- _____ Index sheet referencing individual sheets included in package;
- _____ Site plan name;
- _____ Property owner's name, address, telephone number and designated representative;
- _____ Architect, landscape architect and engineer's name, address and telephone numbers;
- _____ Legal description;
- _____ North arrow, engineering bar scale and date prepared;
- _____ All dimensions;
- _____ Location map;
- _____ Footprint and size of all EXISTING buildings and structures;
- _____ Footprint and size of all PROPOSED buildings and structures;
- _____ All required setbacks including dimensions between buildings;
- _____ All existing and proposed points of access;
- _____ All required sight triangles/free vision zones;
- _____ All parking spaces, driveways, loading areas and vehicular use areas;
- _____ Location of all onsite stormwater management facilities;
- _____ Location of all outdoor light fixtures;
- _____ Location of all existing and proposed sidewalks;
- _____ Location of trees, tree masses and tree species (include description/location of understory, ground cover vegetation and wildlife habitats or other environmentally unique areas);
- _____ Location of all public and private easements and streets within and adjacent to the site;
- _____ Location of existing and proposed fire hydrants;
- _____ The location and size of existing public utilities;
- _____ Proposed method of water supply and sewage disposal;
- _____ Identification of watercourses or wetlands;
- _____ Conceptual drainage and utility plan with flow direction and method of disposition;
- _____ "Sunshine State One Call" dig information (for location of any utilities in rights-of-way or easements);
- _____ Flood zone for site and base flood elevation;
- _____ Copy of SWFWMD aerial topographic map with site boundaries;
- _____ Depiction (by shading or cross hatching) of required parking lot interior landscape areas;
- _____ The definition and location of all refuse collection facilities including screening to be provided;

ATTENDANCE AT MEETINGS:

The applicant or applicant's representative shall be present at all meetings including DRC, LDRB and City Council, as applicable.

AUTHORIZATION TO VISIT THE PROPERTY:

Site visits to the property by City representatives are essential to process this application. The Owner/Applicant, as notarized below, hereby authorizes the City representatives to visit, photograph and post a notice on the property described in this application.

AUTHORIZATION FOR OWNER'S REPRESENTATIVE(S):

I _____, the **owner, hereby authorize** _____ **to act as my representative(s)** in all matters pertaining to the processing and approval of this application, including modifying the project. I agree to be bound by all representations and agreements made by the designated representative.

Signature of Current Property Owner(s): _____

Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____ who is personally known to me and/or produced _____ as identification.

STATE OF FLORIDA, COUNTY OF PASCO

Notary Public _____

My Commission Expires: _____

APPLICANT'S AFFIDAVIT:

I _____, the **owner or authorized representative**, have read and understand the contents of this application. The information contained in this application, attached exhibits and other information submitted is complete and in all aspects true and correct, to the best of my knowledge. **I understand that in granting any conditional use or special exception, the City Council may prescribe appropriate conditions and safeguards which may include reasonable time limits for the existence of a use, and reasonable time limits within which action for which the conditional use/special exception shall commence or be completed, or both.**

Signature of Owner or Authorized Representative: _____

Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____ who is personally known to me and/or produced _____ as identification.

STATE OF FLORIDA, COUNTY OF PASCO

Notary Public _____

My Commission Expires: _____

Table I: Estimated Sewage/Water Flows for Commercial Development

Type of Establishment Gallons Per Day (GPD)

Commercial:

Airports

- (a) Per passenger . . . 5
- (b) Add per employee (per 8 hr. shift) . . . 20

Barber and beauty shops (per chair) . . . 100

Bowling alleys (toilet wastes only per lane) . . . 100

Country club

- (a) Per resident . . . 100
- (b) Per member . . . 25
- (c) Per employee (per 8 hour shift) . . . 20

Dentist offices

- (a) Per wet chair . . . 200
- (b) Per non-wet chair . . . 50

Doctors' offices . . . 250

Factories, exclusive of industrial wastes (gallons per employee per 8 hr. shift)

- (a) No showers provided . . . 20
- (b) Showers provided . . . 35

Food service operations

- (a) Ordinary restaurant (per seat) . . . 50
- (b) 24-hour restaurant (per seat) . . . 75
- (c) Single service articles only (per seat) . . . 25
- (d) Bar and cocktail lounge (per seat) . . . 30
- (e) Drive-in restaurant (per car space) . . . 50
- (f) Carry-out only
 - 1. Per 100 square feet of floor space . . . 50
 - 2. Add per employee (per 8 hr. shift) . . . 20
- (g) Institutions (per meal) . . . 5

Hotel and motels

- (a) Regular (per room)
- (b) Result hotels, camps, cottages (per person) . . . 75
- (c) Add for establishments with self-service laundry facilities (per machine) . . . 400

Office building (per employee per 8 hr shift) . . . 20

Service stations (per water closet and urinal) . . . 250

Shopping centers without food or laundry (per square foot of floor space) . . . 0.1

Stadium, race track, ball parks (per seat) . . . 5

Stores (per square foot of floor space) . . . 0.1

Swimming and bathing facilities, public (per person) . . . 10

Theaters

- (a) Indoor, auditoriums (per seat) . . . 5
- (b) Outdoor, drive-ins (per space) . . . 10

Trailer or mobile home park (per trailer space) . . . 200

Travel trailer or recreational vehicle park

- (a) Travel trailer (overnight), without water and sewer hookup (per trailer space) . . . 75
- (b) Travel trailer (overnight), with water and sewer hookups (per trailer space) . . . 100

Institutional:

Churches (per seat) . . . 3

Hospitals (per bed (does not include kitchen wastewater flows) . . . 200

Nursing homes, rest homes (per bed) (does not include kitchen wastewater flows)...100

Parks, public picnic

- (a) With toilets only (per person) . . . 5
- (b) With bathhouses, showers and toilets (per person) . . . 10

Schools (per person)

- (a) Day-type . . . 15
- (b) Add for showers . . . 5
- (c) Add for cafeteria . . . 5
- (d) Add for day school workers . . . 15
- (e) Boarding type . . . 75

Work or construction camps, semi-permanent (per worker) . . . 50"