



# Application for Planning Development Review

## Project Information

**Review Board:** BZA MPB TRC SETDRC CVDRS BPTDRC *Admin. only*

<b>Application Type:</b>		<b>Administrative:</b>	
Abandonment	Planned Development	Administrative Master Plan	
Annexation	Planning Official Appeal	Modification of Standards	
Conditional Use	Rezoning (Initial)	Determination:	
DRI	Rezoning (Non-PD)	Alcoholic Beverage	Final Site Plan
GMP: Map Amend.	Street Name Change	Dog-Friendly Dining	Mobile Vendor
GMP: Text Amend.	Variance	Donation Bin	Other
Master Plan	Zoning Official Appeal	Determination Appeal	

**Subdivisions:**

Major Plat	Platting Exemption	Plat with MODS
Minor Plat	Revert to Original Plat	Final Plat

Project Name: \_\_\_\_\_

Property Address/Location: \_\_\_\_\_

Parcel Identification Number: \_\_\_\_\_

Project Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**STAFF ONLY:** MTG case number: \_\_\_\_\_

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Pre-application meeting verification \_\_\_\_\_ Date \_\_\_\_\_ Total application fee \_\_\_\_\_  
*(required for all requests, except most Determinations and Modifications of Standards)*

NOTE: please e-mail pages 1 & 2 to [CityPlanning@CityOfOrlando.net](mailto:CityPlanning@CityOfOrlando.net)

Property Owner Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Person Uploading Digital Plans: \_\_\_\_\_  
Company & Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

*Note: communication with the Digital Plans system ("ProjectDox") will start with the Digital Plans Uploader. That person can then add in others to be included in the communications chain.*

Applicant (if different from above): \_\_\_\_\_  
Company & Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Primary Contact (if different from above): \_\_\_\_\_  
Company & Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

**Certification**

By my signature below, I certify that the information contained in this application is true and correct, to the best of my knowledge, at the time of the application.

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

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