



COMMUNITY DEVELOPMENT DEPARTMENT

PLAT VACATION

APPLICATION INFORMATION (Revised December 4, 2019)

Sufficiency Review

- Supply a copy of the completed Application form plus Supporting Materials (see checklist below). Staff will have 5 working days from the application submittal date to review the application for completeness. If incomplete, the application will be returned with an explanation why the application was considered incomplete. The applicant may resubmit at any time, but the application will not be reviewed again until the next nearest application deadline.
- If deemed complete, the application will be logged in and assigned to a P&Z and BCC hearing cycle and staff will commence review. The applicant is responsible for promptly providing any information that needs to be updated, modified, or newly submitted. Otherwise, the placement of the application on a public hearing agenda will be delayed or a recommendation of denial may be necessary.

No additional changes may be made to any information in an application after one week before the hearing packet is due to be compiled for the Planning and Zoning Board members or the NOVUS Agenda item deadline for the Board of County Commissioners.

Supporting Materials checklist

- Two copies of the boundary survey of the entire area to be vacated, **signed and sealed** by a registered land surveyor. One copy shall be sized 11" x 17" and the other copy shall be 24" x 36"
- A legal description (including acreage) of the entire area to be vacated. This legal description shall be submitted in Word format that can be inserted into the County's Resolution
- Two certified copies of the plat, sized 11" x 17", with area to be vacated clearly delineated on the plat
- If any streets are to be vacated, a survey sketch including the acreage of each street being vacated
- Proof of all taxes paid
- A check for \$1,410.00 payable to the Charlotte County Board of County Commissioners (CCBCC)
- One disc or thumb drive on which copies of all documents are included in PDF format, and legal description in Word, CAD File.

- A valid traffic study showing current traffic counts on any streets to be vacated (for paved streets only)
- A detailed narrative.

ATTENTION

If approval of this application for a Plat Vacation will result in an increase, by at least one unit, in the gross amount of density available for development on any property that would benefit from this Vacation, then this application is subject to the Transfer of Density Units (TDU) Ordinance. Property owners gaining at least one unit of density through this Plat Vacation have the option of recording a restrictive covenant on their land, which would serve to prevent the owners from utilizing the extra density gained by the Vacation, or they may transfer the required amount of density to the property and thereby be able to develop this density in the future.

Public Hearing Information

TIME: 1:30 P.M. – Planning and Zoning Board
2:00 P.M. – Board of County Commissioners

PLACE: Charlotte County Administration Center, Building A, Room 119
18500 Murdock Circle, Port Charlotte, Florida

UNLESS OTHERWISE ADVERTISED IN THE LOCAL NEWSPAPER

The applicant will receive written notification of the hearing date. The applicant and/or an authorized representative/agent must be present at both the Planning and Zoning Board and the Board of County Commissioners meetings. **Charlotte County reserves the right to schedule petitions at times and dates other than those depicted above.**

Should you have any questions or need assistance, please contact the Charlotte County Community Development Department, 18400 Murdock Circle, Port Charlotte, Florida 33948 or call (941) 764-4954.



**COMMUNITY DEVELOPMENT DEPARTMENT
PLAT VACATION APPLICATION**

Date Received:	Date of Log-in:
Petition #:	
Receipt #:	Amount Paid:

1. Name of plat to be vacated: _____

2. Plat Book # _____ **Page(s) #** _____

3. Parties involved in the application

A. Name of Applicant* (*Applicant must be owner of record*):

Mailing Address: _____

City:	State:	Zip Code:
Phone Number:		Fax Number:

Email Address: _____

* The name and address of every person having a beneficial interest in this property, however small, in the form of a partnership, limited partnership, corporation, trust, or in any form of representative capacity whatsoever for others, shall be disclosed and a list attached to this application, with no exceptions.

B. Name of Agent:

Mailing Address: _____

City:	State:	Zip Code:
Phone Number:		Fax Number:

Email Address: _____

C. Name of Surveyor:

Mailing Address: _____

City:	State:	Zip Code:
Phone Number:		Fax Number:

Email Address: _____

4. Property ID #*:

*If there are more than can fit on the above line, attach a separate page with listing of ID #s.

5. Section _____ Township: _____ Range: _____

6. Commission District: _____

7. Total acreage of project site: _____

8. *Zoning designation(s): _____

*Future Land Use Map designation(s): _____

*if more than one, provide acreage of each

9. Purpose of request: _____

10. Names and acreage of all streets to be vacated as part of this application: _____

AFFIDAVIT

I, the undersigned, being first duly sworn, depose and say that I am the applicant or agent for this Plat Vacation and that data and other supplementary matter attached to and made part of the application are honest and true to the best of my knowledge.

STATE OF _____, COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ who is personally known to me or has/have produced _____ as identification and who did/did not take an oath.

_____ Notary Public Signature	_____ Signature of Applicant/Agent
_____ Notary Printed Signature	_____ Printed Signature of Applicant/Agent
_____ Title	_____ Address
_____ Commission Code	_____ City, State, Zip
	_____ Telephone Number

APPLICANT AUTHORIZATION TO AGENT

I, the undersigned, being first duly sworn, depose and say that I am the applicant for the Plat Vacation of the property described and which is the subject matter of the proposed hearing.

I give authorization for _____ to be my agent for this application.

STATE OF _____, COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ who is personally known to me or has/have produced _____ as identification and who did/did not take an oath.

_____ Notary Public Signature	_____ Signature of Applicant
_____ Notary Printed Signature	_____ Printed Signature of Applicant
_____ Title	_____ Address
_____ Commission Code	_____ City, State, Zip
	_____ Telephone Number