

# *Town of Micanopy*

## Application for Land Use Approval

---

Date: \_\_\_\_\_ Application Number: \_\_\_\_\_

### Requested Approval(s)

Certificate of Appropriateness       Conditional Use       Variance       Re-Zoning   
Site Plan Review       Sign       Fence       Tree Removal       Other  \_\_\_\_\_

---

Property Owner: \_\_\_\_\_

Property Owner Mailing Address: \_\_\_\_\_

Applicant (if other than property owner): \_\_\_\_\_  
(Note: Applicant, if other than Owner, must have written notarized authorization from Owner to take the specific action requested in this application on the Owner's behalf.)

Applicant Mailing Address: \_\_\_\_\_

Owner/Applicant Tel#: (Wk) \_\_\_\_\_ (Hm) \_\_\_\_\_ Email \_\_\_\_\_

---

Property Tax Parcel Number: \_\_\_\_\_ Current Zoning: \_\_\_\_\_

Property Street Address: \_\_\_\_\_

Property Legal Description: \_\_\_\_\_

Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Lot Size: Width \_\_\_\_\_ Depth \_\_\_\_\_ Area \_\_\_\_\_

---

Requested/Proposed Action: \_\_\_\_\_

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

Reason/Justification for this Application: \_\_\_\_\_

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

Has Owner submitted a previous application or applications for subject property? Yes  No

If so, describe & date(s): \_\_\_\_\_  
\_\_\_\_\_

---

Included With this Application:

- Survey       Site Plan       Floor Plan       Elevation Drawings       Construction Drawings  
 Project Photos       Applicant Written Notarized Authorization from Owner  
 Other: \_\_\_\_\_

---

Fee Amount: \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_

Cash       Check: Date \_\_\_\_\_ Number \_\_\_\_\_

---

The undersigned property Owner/Applicant understands that this Application becomes a part of the permanent records of the Town of Micanopy; that the information and statements provided herein and documentation provided herewith are correct and true to the best of the undersigned's knowledge and belief, and all such information/documentation are public record; and that any work or other action associated with the permit/approval granted must commence within one year of the date of the issuance of such permit/approval.

Signature of Owner(s)/Applicant(s): \_\_\_\_\_  
*Name & Title*

Date: \_\_\_\_\_  
*Name & Title*

---

### Town of Micanopy

Approval

Conditional Approval

Approval Denied

Comments, Conditions, & Approval: \_\_\_\_\_

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

Planning & Historic Preservation Board Approved: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name & Title*

Town of Micanopy Approved: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name & Title*