



Walton County Planning and Development Services

31 Coastal Centre Boulevard, Suite 100
Santa Rosa Beach, Florida 32459
Phone 850-267-1955
Facsimile 850-622-9133

47 N 6th Street
DeFuniak Springs, Florida 32433
Phone 850-892-8157
Facsimile 850-892-8162

CHANGE OF USE APPLICATION

This Change of Use Application is used for changes in the use of existing structures and/or primary uses within a Walton County Land Use Designation. This application applies to commercial usage. This application is used when no structural changes are required for the building and/or the subject property.

NOTICE TO ALL APPLICANTS

You are required to schedule a pre-application conference with Planning and Development Services prior to submittal of applications for all development projects. Your application will not be processed without verification that you have attended a pre-application conference with a representative(s) of Planning and Development Services. To schedule a pre-application conference contact (850)267-1955 (South Walton Annex) or (850)892-8157 (North Walton Annex).

A pre-application conference was held with _____
regarding the development of _____
on this _____ day of _____, _____.

Planning Official _____ Title _____

(reverse side of page for pre-application notes)

Project Name: _____ **Date of Application:** _____

APPLICANT

Name: _____
(If company or corporation, name of secretary and president)
Address: _____
City, State, Zip: _____
Telephone Number: _____ Fax Number: _____ Email: _____

PROPERTY INFORMATION

Parcel Identification Number(s) (Obtain from Property Appraiser's Office): _____

Legal Description: _____

PROPERTY OWNER (if different from applicant)

Name: _____
(If company or corporation, name of secretary and president)
Address: _____
City, State, Zip: _____
Telephone Number: _____ Fax Number: _____ Email: _____

PROPERTY INFORMATION

Parcel Identification Number(s) (Obtain from Property Appraiser's Office): _____

Legal Description: _____

AGENT

Name: _____
(If company or corporation, name of secretary and president)
Address: _____
City, State, Zip: _____
Telephone Number: _____ Fax Number: _____ Email: _____

ENGINEER

Name: _____
(If company or corporation, name of secretary and president)
Address: _____
City, State, Zip: _____
Telephone Number: _____ Fax Number: _____ Email: _____

CHANGE OF USE REQUEST

Change of Use Requested: _____

Explain how this *change of use* is in compliance with the Land Development Code and Comprehensive Plan:

Explain how this *change of use* is still compatible with the existing neighborhood: _____

How will this request impact adjacent properties: _____

STATEMENT OF INTENT

A statement of the applicant's intentions to the future selling or leasing of all portions of the development (such as land areas, dwelling units, and commercial facilities) is required. Provide a statement of intent below:

Physical (911) Address of Project: _____

Location of Project (with specific landmarks, and measurement of distances): _____

TRANSPORTATION CONCURRENCY REQUIREMENT

All applications for minor and/or major developments must provide a transportation concurrency study in accordance with Ordinance 2007-10, signed and sealed by either a registered Professional Engineer (PE) or signed by a certified planner, American Institute of Certified Planners (AICP), practicing in the field of transportation planning. The transportation study should reference Ordinance 2007-10, Transportation Concurrency Management System Methodology and Procedures.

The developer acknowledges the term of any Transportation Certificate of Concurrency issued by the County as set forth in Ordinance 2007-10, Section 3.01.03, Expiration of Transportation Certificate of Concurrency for Application for Minor or Major Development Approval.

If the development project traffic impacts a deficient segment of roadway, as identified in the County's Transportation Concurrency Management System (CMS), implementation of one or more mitigation strategies as described and identified in Ordinance 2007-10, Section 14 of Appendix C-3 may be required.

Traffic Generation: Current Trips: _____ Proposed Trips: _____

LAND DESIGNATION / USES

Current Land Use Designation of Parcel: _____
(Per Section 2 of the Walton County Land Development Code / Future Land Use Map / Land Use Determination)

of Residential Lots: _____ # Units per Residential Lot: _____

Multifamily Units: _____ Type of Multifamily Units: _____

Property Acreage: _____

Square Footage of Non-Residential Development:

Existing: _____ s.f. Proposed: _____ s.f. Total: _____ s.f.

Type of Proposed Non-Residential Development: _____

List any outstanding Code Enforcement issues: _____

Adjacent Land Uses:
(Commercial, single-family, multifamily, vacant, etc.)

Future Land Use Category:
(from the LDC/FLUM/Land Use Determination)

North Side: _____

South Side: _____

East Side: _____

West Side: _____

SEWER AND WATER

Will this project be served with public water? YES NO

If yes, who is your provider? _____
(Submit letter of availability and capacity from company providing this service)

Will this project be served with public sewer? YES NO

If yes, who is your provider? _____
(Submit letter of availability and capacity from company providing this service)

SUBMITTAL CHECKLIST

SUBMITTALS FOR ALL DEVELOPMENTS (Full size plans 24" x 36" required)

- Completed and Signed Change of Use Application (original plus 4 copies)
- Full set of Engineering Plans indicating changes (signed and sealed) (5 sets)
- Traffic Study (2 copies)
- Check for Change of Use \$225.00
- Check for Engineering review fee \$375.00

PROJECT INFORMATION

| | |
|--------------------------------|--|
| FLOOD PLAIN (S) | |
| PARCEL IN SQUARE FEET | |
| WETLANDS SQUARE FOOTAGE | |
| PRESERVATION SQUARE FOOTAGE | |
| CONSERVATION EASEMENTS | |
| OPEN SPACE SQUARE FOOTAGE | |
| RECREATION SQUARE FOOTAGE | |
| GREENWAY SQUARE FOOTAGE | |
| SIDEWALKS SQUARE FOOTAGE | |
| LANDSCAPING SQUARE FOOTAGE | |
| PARKING AREA LANDSCAPING SQ FT | |
| NUMBER OF BUILDINGS | |
| STRUCTURE HEIGHT | |
| TYPE OF STRUCTURE | |
| BUILDING SQUARE FOOTAGE | |
| FRONT SETBACKS | |
| SIDE SETBACKS | |
| REAR SETBACK | |
| NUMBER OF PARKING SPACES | |
| # COMPACT PARKING SPACES | |
| SHARED PARKING (Y/N) | |
| OVERFLOW PARKING (Y/N) | |
| # HANDICAPPED PARKING SPACES | |
| # LOADING SPACES | |
| # BIKE SPACES | |
| STREET WIDTHS ALLOWED | |
| CROSS ACCESS AGREEMENT (Y/N) | |
| CCCL PERMIT # | |
| FDEP GENERAL PERMIT # | |
| FDEP POTABLE WATER PERMIT# | |
| FDEP STORMWATER PERMIT # | |
| FDEP WASTEWATER PERMIT # | |
| DREDGE & FILL PERMIT # | |
| FDOT PERMIT# | |

PERMITS

Will state permits be required for this project? YES NO
 (Submit statement from project engineer)

If so, what State Permits will be required? List: _____
