



COLLIER COUNTY GOVERNMENT  
GROWTH MANAGEMENT DEPARTMENT  
[www.colliergov.net](http://www.colliergov.net)

2800 NORTH HORSESHOE DRIVE  
NAPLES, FLORIDA 34104  
(239) 252-2400 FAX (239) 252-5724

## ADDRESSING CHECKLIST

Please complete the following and email to [GMD\\_Addressing@colliergov.net](mailto:GMD_Addressing@colliergov.net) or fax to the Operations Division at 239-252-5724 or submit in person to the Addressing Section at the above address. Form must be signed by Addressing personnel prior to pre-application meeting. please allow 3 days for processing.

Not all items will apply to every project. Items in **bold type** are required. **FOLIO NUMBERS MUST BE PROVIDED.** Forms older than 6 months will require additional review and approval by the Addressing Section.

**PETITION TYPE** (*Indicate type below, complete a separate Addressing Checklist for each Petition type*)

- |   |  |
|---|--|
| <input type="checkbox"/> BL (Blasting Permit)               | <input type="checkbox"/> SDP (Site Development Plan)                   |
| <input type="checkbox"/> BD (Boat Dock Extension)           | <input type="checkbox"/> SDPA (SDP Amendment)                          |
| <input type="checkbox"/> Carnival/Circus Permit             | <input type="checkbox"/> SDPI (Insubstantial Change to SDP)            |
| <input type="checkbox"/> CU (Conditional Use)               | <input type="checkbox"/> SIP (Site Improvement Plan)                   |
| <input type="checkbox"/> EXP (Excavation Permit)            | <input type="checkbox"/> SIPI (Insubstantial Change to SIP)            |
| <input type="checkbox"/> FP (Final Plat)                    | <input type="checkbox"/> SNR (Street Name Change)                      |
| <input type="checkbox"/> LLA (Lot Line Adjustment)          | <input type="checkbox"/> SNC (Street Name Change – Unplatted)          |
| <input type="checkbox"/> PNC (Project Name Change)          | <input type="checkbox"/> TDR (Transfer of Development Rights)          |
| <input type="checkbox"/> PPL (Plans & Plat Review)          | <input type="checkbox"/> VA (Variance)                                 |
| <input type="checkbox"/> PSP (Preliminary Subdivision Plat) | <input type="checkbox"/> VRP (Vegetation Removal Permit)               |
| <input type="checkbox"/> PUD Rezone                         | <input type="checkbox"/> VRSFP (Vegetation Removal & Site Fill Permit) |
| <input type="checkbox"/> RZ (Standard Rezone)               | <input type="checkbox"/> OTHER _____                                   |

**LEGAL DESCRIPTION** of subject property or properties (*copy of lengthy description may be attached*)

**FOLIO (Property ID) NUMBER(s)** of above (*attach to, or associate with, legal description if more than one*)

**STREET ADDRESS** or **ADDRESSES** (*as applicable, if already assigned*)

- **LOCATION MAP** must be attached showing exact location of project/site in relation to nearest public road right-of-way
- **SURVEY** (copy - needed only for unplatted properties)

**CURRENT PROJECT NAME** (*if applicable*)

**PROPOSED PROJECT NAME** (*if applicable*)

**PROPOSED STREET NAMES** (*if applicable*)

**SITE DEVELOPMENT PLAN NUMBER** (*for existing projects/sites only*)

SDP \_\_\_ - \_\_\_ or AR or PL # \_\_\_\_\_



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Project or development names proposed for, or already appearing in, condominium documents (if application; indicate whether proposed or existing)

Please Return Approved Checklist By:  Email  Fax  Personally picked up

Applicant Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email/Fax: \_\_\_\_\_

Signature on Addressing Checklist does not constitute Project and/or Street Name approval and is subject to further review by the Operations Division.

**FOR STAFF USE ONLY**

Folio Number \_\_\_\_\_

Folio Number \_\_\_\_\_

Folio Number \_\_\_\_\_

Folio Number \_\_\_\_\_

Folio Number \_\_\_\_\_

Folio Number \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

**IF OLDER THAN 6 MONTHS, FORM MUST BE  
UPDATED OR NEW FORM SUBMITTED**