



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) 252-6358

**Comparable Use Determination**  
LDC sections 2.03.00 A, 10.02.06 J & Code of Laws section 2-83 – 2-90  
Chapter 3 G.6 of the Administrative Code

PROJECT NUMBER  
PROJECT NAME  
DATE PROCESSED

*To be completed by staff*

- PUD Zoning District
- Standard Zoning District

**APPLICANT CONTACT INFORMATION**

Name of Property Owner(s): \_\_\_\_\_

Name of Applicant if different than owner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Name of Agent(s): \_\_\_\_\_

Firm: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**PROPERTY INFORMATION**

Site Address: \_\_\_\_\_ Folio Number: \_\_\_\_\_

Property Owners Name: \_\_\_\_\_

**DETERMINATION REQUEST**

The determination request and justification for the use must be done by a certified land use planner or a land use attorney. Provide the completed request on a separate attached sheet. Please be very specific and include the SIC Code, if known. The request should adhere to the following format:

*"I request a determination from the Planning Manager and approval from the Office of the Hearing Examiner, that the use of \_\_\_\_\_ is comparable and compatible with the permitted uses in the \_\_\_\_\_ PUD or in the \_\_\_\_\_ Straight Zoning District."*



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**SUBMITTAL REQUIREMENTS CHECKLIST**

See Chapter 3 G.6 of the Administrative Code for submittal requirements. The following items are to be submitted with the application packet. **Incomplete submittals will not be accepted.**

REQUIREMENTS FOR REVIEW	# OF COPIES	REQUIRED	NOT REQUIRED
Completed Application (download current form from County website)	1	<input checked="" type="checkbox"/>	
<a href="#">Affidavit of Authorization</a>	1	<input checked="" type="checkbox"/>	
<a href="#">Completed Addressing Checklist</a>	1	<input checked="" type="checkbox"/>	
Determination request and the justification for the use	1	<input checked="" type="checkbox"/>	
PUD Ordinance and Development Commitment information		<input type="checkbox"/>	<input type="checkbox"/>
<a href="#">Property Ownership Disclosure Form</a>	1	<input checked="" type="checkbox"/>	
Electronic Copies of all documents *Please be advised: The Office of the Hearing Examiner requires all materials to be submitted electronically in PDF format.			

**ADDITIONAL REQUIREMENTS FOR THE PUBLIC HEARING PROCESS:**

- Following the completion of the review process by County review staff, the applicant shall submit all materials electronically to the designated project manager.
- Please contact the project manager to confirm the number of additional copies required.

**FEE REQUIREMENTS:**

- Application:** \$1,000.00; Additional Fees of \$100 per hour will be charged as needed upon completion of review and research. Payment of Additional Fees will be required prior to the release of the verification.
- Estimated Legal Advertising Fee for the Office of the Hearing Examiner:** \$1,125.00

*All checks payable to: Board of County Commissioners*

The completed application, all required submittal materials, and the permit fee shall be submitted to:

Growth Management Department/Zoning Division  
 ATTN: Business Center  
 2800 North Horseshoe Drive  
 Naples, FL 34104

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Printed Name

*Please be advised that the zoning letter is based upon the available records furnished by Collier County and what was visible and accessible at the time of inspection. This report is based on the Land Development Code that is in effect on the date the report was prepared. Code regulations could be subject to change. While every attempt has been made to ensure the accuracy or completeness, and each subscriber to or user of this report understands that this department disclaims any liability for any damages in connection with its use. In addition, this department assumes no responsibility for the cost of correcting any unreported conditions.*