

**MINOR SUBDIVISION PLAT (FP) APPLICATION**  
LDC section 10.02.04  
Chapter 5 of the Administrative Code

**APPLICANT CONTACT INFORMATION**

Name of Owner: \_\_\_\_\_  
 Name of Applicant if different than owner: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

Name of Agent: \_\_\_\_\_  
 Firm: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

**PROPERTY INFORMATION**

Provide a detailed legal description of the property covered by the application (if space is inadequate, attach on separate page):

Project Name: \_\_\_\_\_ Acres: \_\_\_\_\_  
 Address of subject site and general location: \_\_\_\_\_  
 \_\_\_\_\_  
 Parent/Property ID Number: \_\_\_\_\_ Section/Township/Range: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Subdivision: \_\_\_\_\_ Unit: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_  
 Zoning Designation: \_\_\_\_\_

**SUBMITTAL REQUIREMENT CHECKLIST**

At time of submittal, the checklist is to be completed and submitted with the application packet. Please provide the submittal items in the exact order listed below, with cover sheets attached to each section. **Incomplete submittals will not be accepted.**

REQUIREMENTS FOR REVIEW:	# OF COPIES	REQUIRED	NOT REQUIRED
Completed Application (download current form from the County website)	1	<input type="checkbox"/>	<input type="checkbox"/>
Cover Letter briefly explaining project	1	<input type="checkbox"/>	<input type="checkbox"/>
Signed & Sealed Plat, less than 6 months old	6	<input type="checkbox"/>	<input type="checkbox"/>
Signed & Sealed Boundary Survey, less than 6 months old	6	<input type="checkbox"/>	<input type="checkbox"/>
Completed Addressing Checklist	1	<input type="checkbox"/>	<input type="checkbox"/>

**SUBMITTAL REQUIREMENT CHECKLIST CON'T**

REQUIREMENTS FOR REVIEW:	# OF COPIES	REQUIRED	NOT REQUIRED
Ownership Disclosure Form	1	<input type="checkbox"/>	<input type="checkbox"/>
Notice of Intent letter	1	<input type="checkbox"/>	<input type="checkbox"/>
PUD Ordinance and Development Commitment Information	1	<input type="checkbox"/>	<input type="checkbox"/>
PUD Monitoring Schedule	1	<input type="checkbox"/>	<input type="checkbox"/>
Evidence of Authority/Affidavit of Authorization	1	<input type="checkbox"/>	<input type="checkbox"/>
Zoning Data Sheets	1	<input type="checkbox"/>	<input type="checkbox"/>
Certificate of Public Facility Adequacy (COA) Application with fee, if applicable	1	<input type="checkbox"/>	<input type="checkbox"/>
School Impact Analysis Application, if applicable <ul style="list-style-type: none"> <li>• <b>School Concurrency:</b> If the proposed project includes a residential component, you are required to contact the School District of Collier County at 239-377-0267 to discuss school concurrency requirements.</li> </ul>	1	<input type="checkbox"/>	<input type="checkbox"/>
Opinion of Title	1	<input type="checkbox"/>	<input type="checkbox"/>
Historical/Archeological Survey	1	<input type="checkbox"/>	<input type="checkbox"/>
Traffic Impact Study	1	<input type="checkbox"/>	<input type="checkbox"/>
Easement Approval Letters	1	<input type="checkbox"/>	<input type="checkbox"/>
Electronic copies of all documents and plans in PDF Format and a CD of plans in CAD Format	1	<input type="checkbox"/>	<input type="checkbox"/>

**FEES**

- **Subdivision Final Plat:**
  - Residential- \$1,000.00 plus \$5.00 per acre (or fraction thereof)
  - Nonresidential- \$1,000.00 plus \$10.00 per acre (or fraction thereof)
- **School Concurrency Fees:** [reserved] School Concurrency Review Fee, if required.
  - Mitigation Fees, if applicable: to be determined by the School District in coordination with the County.

All Checks payable to: Board of County Commissioners

The completed application, all required submittal materials and fees shall be submitted to:  
**Growth Management Department/Development Services**  
**ATTN: Business Center-Client Services**  
**2800 North Horseshoe Drive**  
**Naples, FL 34104**