

VARIANCE - ADMINISTRATIVE SUBMISSION REQUIREMENTS FOR COMPLETENESS REVIEW

- Completed Affidavit of Ownership/Agent Authorization (Form B-2)
- Completed Administrative Variance Application (Form B-9)
- Application fee payment receipt
- Historic Preservation Certificate of Appropriateness (if applicable)(copy of approval or copy of application)
- Signed and Sealed As-Built Survey
- Demonstration of Hardship letter prepared b applicant/agent.

**MANATEE COUNTY GOVERNMENT
BUILDING AND DEVELOPMENT SERVICES DEPARTMENT
ADMINISTRATIVE VARIANCE APPLICATION**

FOR STAFF USE ONLY

Date: _____ File Number: _____

File Name: _____

This application is for Administrative Variance Requests.

NAME OF THE PROJECT: _____

A. Property Information

1. Project Numbers of Previous Approvals (Bldg Permit and/or Site Plan Numbers): _____
2. D. P. Number(s): _____
3. Section: _____ Township: _____ Range: _____
4. Subdivision Name (if Platted): _____
5. Lot: _____ 6. Block: _____
7. Address or Location of Property (See Address Coordinator, if physical address is needed): _____
9. Property Size (to the nearest tenth of acre or sq. ft.): _____
10. Existing Use(s) of Subject Property (i.e.: vacant, residence, commercial, etc.): _____

11. Describe Variance Request in Detail (Attach Separate Sheet if Necessary): _____

B. Names/Addresses

List all person(s) having ownership in subject property

1. Name of Property Owner: _____
Address: _____
Zip: _____ Telephone: _____ Fax: _____
Email Address: _____

2. Name of Property Owner: _____
Address: _____
Zip: _____ Telephone: _____ Fax: _____
Email Address: _____

3. Name of Agent: _____
Address: _____
Zip: _____ Telephone: _____ Fax: _____
Email Address: _____

4. Name of Engineer: _____
Address: _____
Zip: _____ Telephone: _____ Fax: _____
Email Address: _____

5. Name of Architect: _____
Address: _____
Zip: _____ Telephone: _____ Fax: _____
Email Address: _____

6. Name of Landscape Architect: _____
Address: _____
Zip: _____ Telephone: _____ Fax: _____
Email Address: _____

NOTE: UNLESS OTHERWISE NOTED, ALL WRITTEN CORRESPONDENCE WILL BE SENT TO THE AGENT. IF THERE IS NO AGENT, COMMENTS WILL BE SENT TO THE PROPERTY OWNER.

C. Signature

I hereby certify that the information in this application is true and correct. I have read this application and understand that other review processes and fees may be required prior to applying for and receiving Building Permits and/or Final Development Approval.

By executing this application, I acknowledge that I am familiar with the Rules of Procedure which apply to the boards or commissions which will act on my application and that I have read and understand such Rules of Procedures.

(Signature of Property Owner or Agent)

Additional Information

CONTACT:

Building and Development Services Department
Reviewer on Call
1112 Manatee Avenue West, Fourth Floor 34205
P. O. Box 1000, Bradenton, FL 34206

Telephone: (941) 748-4501, Extension 3070
Fax Number: (941) 708-6152
<http://www.mymanatee.org>

**MANATEE COUNTY BUILDING DEVELOPMENT SERVICES DEPARTMENT
AFFIDAVIT OF OWNERSHIP/AGENT AUTHORIZATION AFFIDAVIT**

Property Owner (Company or individual) *(print)*: _____
Mailing Address *(print)*: _____
Officer's Name and Title *(print)*: _____

Being first duly sworn, depose(s) and say(s):

1. That I am (we are) the owner's and record title holder(s) of the following described property legal description, to wit: _____

2. That this property constitutes the property for which a request for _____

(Type of Application Approval Requested)
Is being applied for to Manatee County, Florida;
3. That the undersigned has (have) appointed and does (do) appoint _____
_____ as agent(s) to execute any petitions or other documents necessary to affect such petition; and request that you accept my agent(s) signature as representing my agreement of all terms and conditions of the approval process;
4. That this affidavit has been executed to induce Manatee County, Florida to consider and act on the foregoing request;
5. That I, (we) the undersigned authority, hereby certify that the foregoing is true and correct.

Owner's Signature/Print Title

Owner's Signature/Print Title

STATE OF FLORIDA
COUNTY OF **MANATEE**

The foregoing instrument was acknowledged before me this _____ by
(date)
_____ who is personally known to me or who
(name of person acknowledging)
has produced _____ as identification.
(type of identification)

My Commission Expires: _____

Signature of Person Taking Acknowledgment

Name

Title or Rank