Zoning Verification Application



Important Instructions to All Applicants:

Zoning Verification applications can be submitted via email to <u>zoningintake-DSD@HCFLGov.net</u>. You will receive a confirmation email within three business days that will also include payment instructions. If you do not receive this email within three business days, please email us at <u>zoningintake-DSD@HCFLGov.net</u>.

Zoning verification letters are processed in the order received. Due to the high volume of verification requests, please allow thirty (30) business days for the review to be completed. Requests for expedited responses cannot be accomodated.

Once the review is complete, you will receive your Zoning Verification letter via email.

IMPORTANT: This form is <u>NOT</u> for zoning sign-offs for <u>Community Residential Homes</u> for Agency for Health Care Administration (AHCA) licensing, <u>Billboard Verification</u> or for <u>Affordable Housing</u>. Please use the <u>appropriate form</u> for these requests.

		Official Use Only		
Application No:	Intake Date:	Receipt Number:	Intake Staff Signature:	
Name:				
Address:		City	State	Zip:
noneEmail:				
Folio Number of the prop	erty:			
Please go to <u>HCPAFL.org</u> to	o obtain the Folio Number	of the property.		
Site Address of the proper	-ty:			
If you wish to inquire a		, you must submit a separat ment will be required for eac		equest for each property.
•	-	vill be delivered by email o her than the one identified		-
Name:				
Address:		City	State	7in [.]

Email:

Please include a written statement identifying the information sought for zoning verification. If you do not include a written statement with your request, the verification letter will identify the property's zoning, general use allowances and, if the property is zoned Planned Development (PD), the general site plan and conditions of approval.

If yes, please identify that use: _____

Please note that requests to revise completed Zoning Verification letters to include additional information that was not identified in your original ZV request will not be granted and will require submittal of a new ZV application and fee payment.

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Please note that determinations of nonconforming uses or improvements is a separate service offered by this department and is beyond the scope of a Written Zoning Verification. If you are aware the property contains a nonconforming structure other than signs, characteristics of land, use or density and wish to request the legal status of those nonconformities, you must submit a Determination of Nonconformity application. If you are aware the property is a nonconforming lot, you must submit a Nonconforming Lot application.

For additional information regarding this application, contact:

- For submittal questions, please email <u>zoningintake-DSD@HCFLGov.net</u>
- For determination of Compliance or Certificate of Occupancy information, call (813) 272-5600 ext. 1, then 2.
- For Zoning Violations, contact Hillsborough County Code Enforcement Department at (813) 274-6600.

To view the Hillsborough County Land Development Code visit <u>http://library.municode.com/index.</u> <u>aspx?clientId=12399&stateId=9&stateName=Florida</u>

Identification of Sensitive/Protected Information and Acknowledgement of Public Records

Pursuant to <u>Chapter 119 Florida Statutes</u>, all information submitted to Development Services is considered public record and open to inspection by the public. Certain information may be considered sensitive or protected information which may be excluded from this provision. Sensitive/protected information may include, but is not limited to, documents such as medical records, income tax returns, death certificates, bank statements, and documents containing social security numbers.

While all efforts will be taken to ensure the security of protected information, certain specified information, such as addresses of exempt parcels, may need to be disclosed as part of the public hearing process for select applications. If your application requires a public hearing and contains sensitive/protected information, please contact <u>Hillsborough County</u> <u>Development Services</u> to determine what information will need to be disclosed as part of the public hearing process.

Additionally, parcels exempt under <u>Florida Statutes §119.071(4)</u> will need to contact <u>Hillsborough County Development</u> <u>Services</u> to obtain a release of exempt parcel information.

Are you seeking an exemption from public disclosure of selected information submitted with your application pursuant to Chapter 119 FS? Yes No

I hereby confirm that the material submitted with application



Type of information included and location_____

Does not include sensitive and/or protected information.

Please note: Sensitive/protected information will not be accepted/requested unless it is required for the processing of the application.

If an exemption is being sought, the request will be reviewed to determine if the applicant can be processed with the data being held from public view. Also, by signing this form I acknowledge that any and all information in the submittal will become public information if not required by law to be protected.

Signature: ____

(Must be signed by applicant or authorized representative)

Intake Staff Signature: _____

Date: