



# Zoning Interpretations Application

### Official Use Only

Application No: \_\_\_\_\_ Intake Date: \_\_\_\_\_ Receipt Number: \_\_\_\_\_ Intake Staff Signature: \_\_\_\_\_

### Property Information

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

TWN-RN-SEC: \_\_\_\_\_ Folio(s): \_\_\_\_\_ Zoning: \_\_\_\_\_ Future Land Use: \_\_\_\_\_ Property Size: \_\_\_\_\_

### Property Owner Information

Name: \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Fax Number \_\_\_\_\_

### Applicant Information

Name: \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Fax Number \_\_\_\_\_

### Applicant's Representative (if different than above)

Name: \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Fax Number \_\_\_\_\_

**I hereby swear or affirm that all the information provided in the submitted application packet is true and accurate, to the best of my knowledge, and authorize the representative listed above to act on my behalf on this application.**

\_\_\_\_\_  
Signature of the Applicant

\_\_\_\_\_  
Type or print name

**I hereby authorize the processing of this application and recognize that the final action taken on this petition shall be binding to the property as well as to the current and any future owners.**

\_\_\_\_\_  
Signature of the Owner(s) – (All parties on the deed must sign)

\_\_\_\_\_  
Type or print name



# Affidavit to Authorize Agent

(If applicant is other than owner)

**State of Florida  
County of Hillsborough**

(Name of all property owners), 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, to wit:

Address or general location: \_\_\_\_\_ Folio No(s): \_\_\_\_\_

2. That this property constitutes the property for which a request for a: \_\_\_\_\_  
\_\_\_\_\_ (Nature of request)  
is being applied to the Board of County Commissioners, Hillsborough County.

3. That the undersigned (has/have) appointed \_\_\_\_\_  
as (his/their) agent(s) to execute any permits or other documents necessary to affect such permit.

4. That this affidavit has been executed to induce Hillsborough County, Florida, to consider and act on the above-described property;

5. That (I/we), the undersigned authority, hereby certify that the foregoing is true and correct.

\_\_\_\_\_  
Signed (Property Owner)

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Signed (Property Owner)

\_\_\_\_\_  
Type or Print Name

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_  
(year)

\_\_\_\_\_  
(name of person acknowledging)

Personally Known OR  Produced Identification

Type of Identification Produced \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary taking acknowledgment)

\_\_\_\_\_  
Type or Print Name of Notary Public

\_\_\_\_\_  
Commission number

\_\_\_\_\_  
Expiration date

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_  
(year)

\_\_\_\_\_  
(name of person acknowledging)

Personally Known OR  Produced Identification

Type of Identification Produced \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary taking acknowledgment)

\_\_\_\_\_  
Type or Print Name of Notary Public

\_\_\_\_\_  
Commission number

\_\_\_\_\_  
Expiration date

# Identification of Sensitive/Protected Information and Acknowledgement of Public Records



**Hillsborough  
County Florida**  
Development Services

Pursuant to [Chapter 119 Florida Statutes](#), 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 [Hillsborough County Development Services](#) to determine what information will need to be disclosed as part of the public hearing process.

Additionally, parcels exempt under [Florida Statutes §119.071\(4\)](#) will need to contact [Hillsborough County Development Services](#) 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 \_\_\_\_\_

Includes sensitive and/or protected information.

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: \_\_\_\_\_



# Submittal Requirements for Zoning Interpretation

Per [Hillsborough County Land Development Code Section 11.01.01](#), an interpretation of the text of the LDC and the official zoning atlas may be requested by any resident, landowner or any person having a contractual interest in land in unincorporated Hillsborough County.

## A. Application Submittal

Documents must be submitted as separate PDF documents with a minimum image resolution of 300 dpi labeled according to their contents and submitted in a single email to [ZoningIntake-DSD@HCFLGov.net](mailto:ZoningIntake-DSD@HCFLGov.net). Incomplete submittals will receive an email indicating the documents that are missing and will require a full resubmittal. Payment instruction shall be emailed to the applicant after verification of a complete application submittal.

For questions regarding the application process or requirements, please email [ZoningIntake-DSD@HCFLGov.net](mailto:ZoningIntake-DSD@HCFLGov.net).

## B. Review Period

Please allow 30 business days (approximately six calendar weeks) for the review to be completed. Decisions will be emailed to the designated representative identified on the application. If a designated representative is not identified, the decision will be emailed to the applicant.

*Incomplete applications will not be accepted*

	Included	N/A	Requirements
1	<input type="checkbox"/>	<input type="checkbox"/>	<b><u>Application form</u></b> (included in this package)
2	<input type="checkbox"/>	<input type="checkbox"/>	<b><u>Affidavit(s) to Authorize Agent</u></b> (if applicable) NOTE: All property owners must sign either the Application form or the Affidavit to Authorize Agent. If property is owned by a corporation, submit the Sunbiz information indicating that you are authorize to sign the application and/or affidavit.
3	<input type="checkbox"/>	<input type="checkbox"/>	<b>Sunbiz Form</b> (if applicable). This can be obtained at <a href="http://Sunbiz.org">Sunbiz.org</a> .
5	<input type="checkbox"/>	<input type="checkbox"/>	<b>Written Statement</b> (identify the specific issue or provision that requires interpretation and explanation and why the interpretation is needed.)
6	<input type="checkbox"/>	<input type="checkbox"/>	<b><u>Identification of Sensitive/Protected Information and Acknowledgement of Public Records</u></b>
7	<input type="checkbox"/>	<input type="checkbox"/>	<b>Copy of Current Recorded Deed(s) for the subject property</b>
9	<input type="checkbox"/>	<input type="checkbox"/>	<b>Supplemental Information</b> (optional)