



**City of Stuart**  
**121 SW Flagler Ave.**  
**Stuart, FL 34994**  
**development@ci.stuart.fl.us**  
**(772) 288-5326**

Received by: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

## East Stuart Conditional Use Application

Project ID# \_\_\_\_\_  
*(Staff Entry)*

Pre-App Conference Date:	Application Date:
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### SITE INFORMATION

Project Name:	Parcel ID#:
Site Address:	
Subdivision:	Lot(s):
Site Acreage:	Flood Zone/Base Flood Elevation:
Current Zoning District / CRA Subdistrict (if applicable):	
Current Comprehensive Plan Future Land Use Designation:	
Existing Land Use:	Proposed Land Use:
Proposed Square Footage (if applicable):	Proposed Density (if applicable):

### PETITIONER INFORMATION

Property Owner:	Phone Number / Email Address:
Property Owner's Mailing Address:	
Applicant (if not Owner):	Phone Number / Email Address:
Applicant's Mailing Address:	
Agent/Contact Person:	Phone Number / Email Address:
Agent's Mailing Address:	
Architect:	Engineer:
Planner:	Landscape Architect:

# Statement of Ownership and Designation of Authorized Agent

*(Please Print or Type)*

Before me, the undersigned authority, personally appeared \_\_\_\_\_

Who, being by me first duly sworn, on oath deposed and says:

1. That he/she is the fee simple title owner of the property described in the attached Legal Description.
2. That he/she is requesting approval of a \_\_\_\_\_ in the City of Stuart, FL.
3. That he/she has appointed \_\_\_\_\_ to act as an authorized agent on his/her behalf to accomplish the above project.

Name of Owner: \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner:

\_\_\_\_\_  
By: Name/Title

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
P.O. Box

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Email Address:

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Sworn and subscribed before me by means of \_\_\_ physical presence or \_\_\_ online notarization, this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ By \_\_\_\_\_.

Personally Known OR Produced Identification  
Type of Identification Produced:

\_\_\_\_\_  
Notary Public

My Commission expires:

\_\_\_\_\_

# **Financial Responsibility Form**

*(Please Print or Type)*

The Undersigned, as the Property Owner, Lessee, Contract Purchaser, or Applicant (circle one), acknowledges responsibility for all City expenses associated with the referenced application (s) including time spent by the City's consultants and further acknowledges that payment of consultant fees will be made prior to the receipt of the consultant comments.

Name:
Title:
Company:
Company Address:

City/State/Zip Code:
Telephone Number:
Facsimile Number:
Email Address (optional):

I hereby certify that all information contained herein is true and correct.

1. Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Property Owner, Lessee, Contract Purchaser or Applicant (circle one)

# Application Requirements

- Fee:
- \$1,598.00 – Major East Stuart Conditional Use Permit (Community Redevelopment Board and City Commission Approval)
  - \$532.00 – Minor East Stuart Conditional Use Permit (Community Redevelopment Board)

Fee: Amendment of Conditions attached to Major UCCU (City Commission)

(This does not include fees that may be charged as a result of application reviews by the City's consultants or any required recording fees)

A Minor East Stuart Conditional Use Permit shall be required for relief from the following regulations of the urban code; paint colors; public art, and architectural materials.

- A Major East Stuart Conditional Use Permit shall be required for relief from the following regulations of the urban code; density, permitted uses, setbacks, location of parking, location of buildings and structures, conflicts with utilities, curb cuts, historic buildings, pitched roofs in the old downtown district, number of stories, building height not to exceed 45 feet, parking located within a building envelope, location of a formula business, and architectural requirements.

**Submittal Requirements:** A completed application form, one (1) copy of all documents on a PDF formatted disc electronically signed and sealed, the payment of fees, and pertinent information per application type as determined by the Development Director.

**Approving Authority:** The Development Director is required to prepare a staff report and recommendation concerning this application for the Community Redevelopment Board (CRB) public hearing (if required) followed by a recommendation to the City Commission.

**Justification:** Please provide justification supporting the request for an East Stuart Conditional Use Permit (include additional pages if needed).

(over)