



# City of Destin

Community Development Department

## Planning Division

City of Destin Annex

4100 Indian Bayou Trail

Destin, Florida 32541

Phone (850) 654-1119 • Fax (850) 460-2171

## MINOR SUBDIVISION APPLICATION

\_\_\_\_\_ - \_\_\_\_\_ - MS

(project number assigned by planning staff)

**All applications must be emailed or shared with [planning@cityofdestin.com](mailto:planning@cityofdestin.com).**

**Minor Subdivision** is a subdivision in which all lots front existing public or private rights-of-way.

Name of Proposed Subdivision: \_\_\_\_\_  
(THIS NAME SHALL BE CONSISTENT ON ALL SUBMITTED PLANS & DOCUMENTS)

### 1. CONTACT INFORMATION:

**A. Owner(s):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

**B. Authorized Agent (if applicable):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

**C. Engineer:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

**D. Surveyor:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

**2. PROPERTY TO BE SUBDIVIDED:**

**Parcel ID (s):** \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_

**Lot:** \_\_\_\_\_ **Block:** \_\_\_\_\_ **Plat Book:** \_\_\_\_\_ **Page Number:** \_\_\_\_\_

**Subdivision:** \_\_\_\_\_

**3. PROJECT INFORMATION:**

**A. General Information:**

1) Future Land Use Map Designation(s) of the Property: \_\_\_\_\_

2) Zoning District(s) of the Property: \_\_\_\_\_

3) Type of Project / Proposed Land Use of the Property: \_\_\_\_\_

\_\_\_\_\_

4) Total Acreage and Square Footage of the Property: \_\_\_\_\_

5) Existing or Proposed Special Exceptions, Variances, Administrative Appeals, etc.:

\_\_\_\_\_

\_\_\_\_\_

6) Total Number of Lots Proposed: \_\_\_\_\_

7) Minimum Lot Area Proposed: \_\_\_\_\_

8) Minimum Lot Width Proposed: \_\_\_\_\_

9) Minimum Lot Depth Proposed: \_\_\_\_\_

**B. Comprehensive Plan Compliance:** Including, but not limited to the following:

Does the Proposed Development Site Include the following (Insert "Yes" or "No" in every blank and include those with a "Yes" on the Plans):

- \_\_\_\_\_ Multimodal District and Design Initiatives
- \_\_\_\_\_ Within Harbor CRA District:                      \_\_\_\_\_ Within Town Center CRA District
- \_\_\_\_\_ 100-Year Flood Plains                                      \_\_\_\_\_ Waterfront Property
- \_\_\_\_\_ Conservation Areas                                      \_\_\_\_\_ Seaward of (Within) a V-Zone
- \_\_\_\_\_ Environmentally Sensitive Area                      \_\_\_\_\_ Seaward of the CCCL
- \_\_\_\_\_ Historic Landmarks                                      \_\_\_\_\_ Protected Dunes
- \_\_\_\_\_ In a Historic District                                      \_\_\_\_\_ Protected/Unique Vegetation
- \_\_\_\_\_ Archeological Sites                                      \_\_\_\_\_ Seaward of Shoreline Protection Zone
- \_\_\_\_\_ Habitat of Threatened Species                      \_\_\_\_\_ Preserved Trees (24" d.b.h. and over)
- \_\_\_\_\_ Habitat of Endangered Species                      \_\_\_\_\_ Protected Trees (12" d.b.h. and over)
- \_\_\_\_\_ Within 200 Feet of a Potable Water Well

If in a Flood Zone, give Minimum Base Flood Elevation Required: \_\_\_\_\_ Provided: \_\_\_\_\_

**4. SUBMITTAL REQUIREMENTS:**

A. \_\_\_\_\_ **Completed application** - All applicable areas of the application shall be filled in and emailed

B. \_\_\_\_\_ **Application Fees : Fee Schedule**  
(FY 2019 Schedule of Fees, Resolution 19-11, adopted 08/05/19, effective 08/06/19)

**Accepted Payments are Cash, Check, MasterCard or Visa. Checks shall be made payable to the City of Destin and submitted to the Planning Division, Community Development Department, City Hall Annex, 4100 Indian Bayou Trail, Destin, Florida 32541.**

C. \_\_\_\_\_ **Proof of Ownership** - A copy of the last recorded deed of the property. Owner on deed must correspond to "Current Owner" identified on page 1.

D. \_\_\_\_\_ **Agent Affidavit** (if applicable) - Required if the applicant is other than the property owner.

E. **Concurrency Evaluation Certificates (CEC's)** - The following must be provided:

- 1). \_\_\_\_\_ Stormwater Management, plus 2 sets of signed, sealed and dated calculations.
- 2). \_\_\_\_\_ DWU Service Questionnaire

**The applicant is responsible for returning each CEC to the Community Development Department, completed, approved and signed.**

F. Plan Requirements (LDC Section 2.18.02): Including, but not limited to, the following:

- 1) \_\_\_\_\_ Cover Sheet
- 2) \_\_\_\_\_ Boundary Survey, which includes the following:
  - a) Signed, sealed and dated by Surveyor registered in the State of Florida.
  - b) No older than six months unless Engineer of Record certifies site has NOT changed.
  - c) Existing conditions of site, which includes trees over 12” in diameter at breast height.
  - d) Delineated Topography.
- 3) \_\_\_\_\_ Demolition Plan (if applicable)
- 4) \_\_\_\_\_ Site Plan
- 5) \_\_\_\_\_ Subdivision Plat (paper copy)
- 6) \_\_\_\_\_ Grading and Drainage Plan – Calculations must be signed & sealed by a Registered Florida Engineer and meet the requirements of Destin Code of Ordinances, Sections 6-346 and 6-352.
- 7) \_\_\_\_\_ Utility Plan
- 8) \_\_\_\_\_ Landscape Plan and Supporting Plans (if applicable)
- 9) \_\_\_\_\_ Street Lighting Plan
- 10) \_\_\_\_\_ Detail Sheets

**G. Checklist. The Subdivision Checklist is required.**

**5. SUBMITTAL PACKAGE QUANTITIES:**

- A. **ONE (1) COMPLETE** electronic package of PDF files emailed or shared with [planning@cityofdestin.com](mailto:planning@cityofdestin.com).

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**NOTE: This application must be filled out completely and must be signed by the owner or his designated agent. If the applicant is different than the owner of the subject property, then an agent affidavit is required from the owner of the property. The agent affidavit must be completely filled out and submitted with this application. If the property has multiple owners, then all owners or their designated agents must sign this application.**

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**I HAVE READ THE FOLLOWING INFORMATION IN THIS APPLICATION AND HAVE FILLED IN ALL ANSWERS CORRECTLY TO THE BEST OF MY ABILITY.**

**APPLICANT:**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

**AGENT AFFIDAVIT  
SPECIAL POWER OF ATTORNEY**

KNOWN ALL MEN BY THESE PRESENTS, THAT I, \_\_\_\_\_ am presently the owner and/or leaseholder at \_\_\_\_\_, and desiring to execute a Special Power of Attorney, have made, constituted and appointed, and by these presents do make, constitute and appoint \_\_\_\_\_ whose address is \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_, my Attorney-in-Fact to act as follows, GIVING AND GRANTING unto said attorney full power to act as my agent in any and all matters pertaining to: \_\_\_\_\_.

FURTHER, I do authorize the aforesaid Attorney-in-Fact to perform all necessary acts in the execution of the aforesaid authorization with the same validity as I could effect if personally present. Any act or thing lawfully done hereunder by the said attorney shall be binding on myself and my heirs, legal and personal representative, and assigns.

PROVIDED; however, that any and all transactions conducted hereunder for me or for my account shall be transacted in my name, and that all endorsements and instruments executed by the said attorney for the purpose of caring out the foregoing powers shall contain my name, followed by that of my said attorney and the designation "Attorney-in-Fact."

OWNER

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**STATE OF** \_\_\_\_\_  
**COUNTY OF** \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of physical presence \_\_\_ or online notarization \_\_, this \_\_\_ day of \_\_\_\_\_, 20\_\_\_,

By: \_\_\_\_\_  
(Print name)

Personally known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_

\_\_\_\_\_  
Notary Signature Seal: