



Palm Beach County Zoning Division
2300 N. Jog Road
West Palm Beach, Florida 33411
Phone: (561) 233-5200
FAX: (561) 233-5165

GENERAL APPLICATION
PUBLIC HEARING AND ADMINISTRATIVE REVIEW

I. REQUEST

CHECK TYPE OF APPLICATION:

PUBLIC HEARING PROCESS:

- To allow an Official Zoning Map Amendment from AP & AR Zoning District to PUD Zoning District
With a Concurrent Land Use Amendment from AP & RR10 Land Use to RR1.25 Land Use
To allow a Class A Conditional Use (CA) for a
To allow a Class B Conditional Use (CB) for a
To allow a Requested Use for a
To allow a Legislative Abandonment of Resolution No: which allowed
To allow a Development Order Amendment to a previously approved:
COZ PDD Class A Class B Requested Use
to modify and/or delete Conditions of Approval to add and/or delete land area
to reconfigure the Master Site Subdivision to add and/or delete units
Landscape Regulating Plans Sign to add, delete, or modify uses
to add and/or delete square footage to add access points
to restart the commencement clock
to
To allow a Type II Variance: (Submit Form #43 Variance Supplemental) Concurrent Standalone
To allow a Subdivision Variance: (Submit Form #43 Variance Supplemental) Concurrent Standalone
To allow a PO Deviation (Submit Form #92 PO Deviation) from Article(s)
To allow a Type II Waiver: (Submit Form #19 Waiver Supplemental) Concurrent Standalone
To allow a Unique Structure in the Zoning District
Other

ADMINISTRATIVE REVIEW PROCESS:

- To allow an Expedited Development Review Officer approval (DROE) (within 2 months of BCC/ZC approval)
To allow a Use subject to Development Review Officer approval for a
To allow a Type II Concurrent Review (Zoning, Building and Land Development)
To allow a Type III Concurrent Review (Zoning and Building)
To allow a Type III Concurrent Review (Zoning and Land Development)
Subdivision with Required Improvement Subdivision without Required Improvement
Projects that do not require platting
To allow an Administrative Modification of a Plan approved by the ZC / BCC / DRO for
To allow a Subdivision
To allow a Transfer of Development Rights (Submit Form #16 TDR Supplemental):
To allow a Type I Waiver (Submit Form #19 Waiver Supplemental) from Article for
To allow an Administrative Abandonment of
Other

II. PROPERTY INFORMATION	
<b>A. Property Control Number (PCN):</b> <small>(List additional PCN(s) on separate sheet)</small>	See attached list
<b>B. Control Number:</b>	2002-90045
<b>C. Control Name :</b>	Indian Trails Grove
<b>D. Application Number:</b>	PDD/W-2015-01457
<b>E. Application Name:</b>	Indian Trails Grove
<b>F. Project Number:</b>	
<b>G. Gross Acreage:</b>	4871.57
<b>H. Gross Acreage of affected area:</b>	4871.57
<b>I. Location of subject property:</b> <small>(proximity to closest major intersection/ road)</small>	West of Seminole Pratt Whitney Road, south of Hamlin
<b>J. Address:</b>	tbd
<b>K. Subdivision Name:</b>	Indian Trails Grove
<b>L. Plat Name:</b>	Indian Trails Grove
<b>M. BCC District:</b>	6

**III. APPLICANT INFORMATION**

**Current Property Owner(s) Name:** Palm Beach West Associates I, LLLP

**Address:** 1600 Sawgrass Corporate Parkway      **City:** Sunrise      **State:** FL      **Zip:** 33323

**Phone:** 954-753-1730      **FAX:** 954-575-5212

**Cell Phone:** 954-775-4053      **Email:** gladys.digirolamo@glhomes.com

**Applicant's Name** (if other than property owner(s) : same)

**Address:** \_\_\_\_\_      **City:** \_\_\_\_\_      **State:** \_\_\_\_\_      **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_      **FAX:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_      **Email:** \_\_\_\_\_

Check (✓) here if Applicant is a contract purchaser. Consent is required from the contract purchaser if a contract is pending to purchase the subject property. Home Owners Association (HOA) or Property Owners Association (POA) consent will be required if subject property is under common ownership or request is to modify any aspect of the project which applies to the entire development (i.e. condition of approval, internal roadway, etc.).

**Agent:\*** Chris Barry, AICP, CUD, Senior Planner      **Name of Firm:** Urban Design Kilday Studios

**Address:** 477 Rosemary Avenue      **City:** West Palm Beach      **State:** FL      **Zip:** 33401

**Phone:** 551-366-1100      **FAX:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_      **Email:** \_\_\_\_\_

**Agent:\*** \_\_\_\_\_      **Name of Firm:** \_\_\_\_\_

**Address:** \_\_\_\_\_      **City:** \_\_\_\_\_      **State:** \_\_\_\_\_      **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_      **FAX:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_      **Email:** \_\_\_\_\_

\* All correspondence will be sent to the Agent(s) unless otherwise specified.

**IV. ARCHITECTURAL REVIEW**

**This application is subject to the requirements of Article 5.C-Design Standards and request review of the proposed elevations concurrent with:**

- Type I Projects Requiring BCC Approval
- Type II Projects Requiring ZC Approval
- Type III Projects Requiring DRO or Site Plan Approval
- Type IV Projects Requiring Building Permit Approval
- The application to revise previously approved elevations
- The structures are non-conforming to Article 5.C. Percentage of renovations has been submitted for review
- The application seeks approval for a Green Architecture

**Note:** All application documents shall be consistent with the current Technical Manual, refer to the Zoning Web Page.

V. ZONING AND FUTURE LAND USE			
Current Zoning District:	AP and AR-10	Proposed Zoning District:	Western Communities Residential
Current Future Land Use:	RR10 & AP	Proposed Future Land Use:	Western Communities Residential
Tier: <input type="checkbox"/> U/S <input checked="" type="checkbox"/> R/EX <input type="checkbox"/> AGR <input type="checkbox"/> GLADES		Overlay (Special Study Area):	Indian Trails Grove Overlay

VI. USE / DENSITY / INTENSITY			
Existing Use:	Agricultural - ROW Crops	Proposed Use:	Residential, Civic, Commercial
Existing Square Footage:	N/A	Proposed Square Footage:	350,000 SF Commercial / Office
Existing Number of Units:	0	Proposed Number of Units:	3897

VII. ADJACENT PROPERTIES						
Identify surrounding Future Land Use and Zoning District. Include existing/approved square footage or number of dwelling units, type of units and density.						
Adjacent Property	FLU Designation	Zoning District	Existing Use	Approved Use	Control No.	Resolution No
NORTH	RR-10, CON, PO RR2.5	AP, AR, PO	Drainage	Drainage, Conservation	N/A	N/A
SOUTH	RR-5, RR-10, AP	AP, AR	Residential Agricultural	same	N/A	N/A
EAST	RR-2.5, & RR-10	AR	Residential School	same	N/A	N/A
WEST	AP	AP	Drainage, Utilities Conservation	same	N/A	N/A

VIII. ENVIRONMENTAL ANALYSIS	
Overall Site is currently under agricultural production and citrus	
<b>General Vegetation Statement:</b>	
<b>Current Grade/Elevation:</b>	Average Grade 19'+/-
<b>Proposed Grade/Elevations:</b>	Shall be designed to meet SFWMD permit requirement (above 19')
<b>Is removal of vegetation required?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes; submit <b>Approval to Protect Native Vegetation Application</b> to ERM. Application available from the ERM Permit Center-PZB
<b>Is site in a Wellfield protection zone?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes; submit <b>Wellfield Protection Affidavit</b> available from PZB-ERM.
<b>Is removal or relocation of trees required?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes; submit a Tree Survey, Analysis and Justification, also submit a Site Plan with the Tree Survey overlaid for approval by PZB - ERM
<b>Health Department:</b> In Justification Statement, under heading "Hazardous Material", address type and amount of 1) all industrial, manufacturing, special or hazardous waste that may be generated; 2) airborne pollutants that may be generated (i.e. dust or other unconfined particulates such as NOx, SOx, CO, VOC's, heavy metals, etc.); and, 3) any special handling of solid waste that may be required.	

IX. COMPLIANCE	
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Is property in compliance with all previous conditions of approval and applicable Code Requirements? If no, please explain in the Justification Statement
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Is the property currently the subject of Code Enforcement action? If yes, provide Code Enforcement Case Number:
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Will the request require modification to a recorded plat or plat with Technical Compliance? If yes, explain in the Justification Statement
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Is the subject property an existing legal lot of record? If no, submit Legal Lot Review application to the Zoning Division
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Do proposed improvements exceed 35% of the improved value of existing structure? If yes, comply with Article 1.F - Nonconformities

X. PROPOSED USE DETAILS					
Building Name	Use	Square Footage	Number of Units	Phase Name	Outparcel
	Public Civic (tbd) Residential SF & Commercial	tbd	662	Phase 1	Parcel A and Civic #1 & Commercial #1
	Private Civic (tbd) Residential and Commercial & Private Rec	tbd	1134	Phase 2	Parcel B and C Civic #2 & Commercial #2 & Private Rec
	Public Civic (tbd) Residential	tbd	702	Phase 3	Parcel D Civic #3 & Civic #4
	Public Civic (tbd) Residential & Commercial	tbd	859	Phase 4	Parcel E Civic #5, #6 & #7, Comm.
	Residential		540	Phase 5	Parcel F

XI. CONCURRENCY			
Concurrency Reservation <input checked="" type="checkbox"/>		Concurrency Equivalency <input type="checkbox"/>	
		Concurrency Exemption <input type="checkbox"/>	
<b>A. Concurrency Case Number:</b>			
<b>B. Water Provider:</b>		PBCWUD	
<b>C. Waste Water Provider:</b>		PBCWUD	
<b>D. Drainage District:</b>		Indian Trails Improvement District	
<b>E. Traffic:</b>		PBC	<b>Traffic Trips Existing:</b>
<b>F. Mass Transit:</b>		PBC	<b>Traffic Trips Proposed:</b> 46,077
<b>G. Traffic Capacity:</b>		<b>Number of Gross Peak Hour Trips:</b> 46,077 (If greater than 30; a traffic study will be required)	
<b>H. Public School:</b>		Frontier Elementary, Osceolo Creek Middle, Seminole Ridge High	
<b>I. Land Development:</b>		PBC	
<b>J. Public Health Provider:</b>		PBC	<b>Well /Septic tank :</b> No
<b>K. Parks</b>		PBC Parks and Recreation	
<b>L. Fire Rescue</b>		PBC	
<b>M. Solid Waste:</b>		Solid Waste Authority (Service Area: 2-Advanced Disposal)	
<b>N. Check the proposed means of achieving access from the development site to a point of legal positive outfall for storm water discharged from the site:</b>			
<input checked="" type="checkbox"/> Property is contiguous to a natural waterway, or a canal owned and operated by a water control district. <input type="checkbox"/> Property owner has legally established drainage rights to convey storm water through all intervening properties between the development site and natural waterway or water control district canal. <input type="checkbox"/> Property abuts a road with a functioning drainage system, and property owner has obtained written confirmation from the entity responsible for maintaining the road that the proposed development is eligible to utilize the road drainage system, subject to meeting all permit requirements for drainage connection. <input type="checkbox"/> Other (specify): _____			

**This application is not complete without the following documents attached:**

1. **Justification Statement:** To address the purpose, project history, intent and design of the objectives of this request.
2. **Response to the Standards:** Attach a written response to each standard as per ULDC Development Review Process, Article 2.B.1.B; 2.B.2.B; 2.B.2.C; 2.B.2.G.3; 2.B.3.E; 2.D.1.E; and 2.D.6.C as amended, based upon the application request(s).
3. **Conditions of Approval (COA):**
  - a. Include the status of all previous Conditions of Approval.
  - b. Include the exact language of any modification(s) to any condition(s).
  - c. If the application request requires an extension of the time for commencement of development or recording a plat then provide further explanation. (The explanation may be added to the Justification Statement.)

**Note:** Please refer to PZB Zoning Website ( <http://www.pbcgov.com/pzb/zoning/index.htm> ) for all ULDC articles referenced in this document and for helpful information in the Technical Manual.

**Indian Trails Grove - PCN List**

00-39-42-25-00-000-1000	00-40-42-27-00-000-9000
00-40-42-17-00-000-7000	00-40-42-31-00-000-9000
00-40-42-18-00-000-7000	00-40-42-30-00-000-9000
00-40-42-19-00-000-9000	00-40-42-34-00-000-1010
00-40-42-20-00-000-9000	00-40-43-03-00-000-3020
00-40-42-21-00-000-9000	00-40-43-04-00-000-9010
00-40-42-22-00-000-1010	