

# **Attachment “B”**

## **Application**

**DEVELOPMENT PLAN REVIEW APPLICATION  
PLANNING & DEVELOPMENT SERVICES**

**OFFICE USE ONLY**

Petition No. \_\_\_\_\_ Fee: \$ \_\_\_\_\_  
1<sup>st</sup> Step Mtg Date: \_\_\_\_\_ EZ Fee: \$ \_\_\_\_\_

Account No. 001-660-6680-3401 [ ]  
Account No. 001-660-6680-1124 (Enterprise Zone) [ ]  
Account No. 001-660-6680-1125 (Enterprise Zone Credit [ ]

**LEVEL OF REVIEW (check one)**

MINOR	INTERMEDIATE	MAJOR	CONCEPT	MASTER
	X			

**Project Name:** Butler Plaza Pod B Outlot - Bahama Breeze

**Property Address:** 3006 Clark Butler Blvd.

**Tax Parcel #(s):** 06810-008-004

**Site Area (acres):** 1.98

**CHECK ALL PROPOSED USES**

<input type="checkbox"/> Residential	<b>Density</b>	<input checked="" type="checkbox"/> Non-residential
Multi-family	Units/acre:	<input checked="" type="checkbox"/> Commercial [ ] Office
Total units:	Total bedrooms:	[ ] Industrial [ ] Other
		Gross floor area: 10,734 sf

Owner(s) of Record (please print)	
Name:	Robert E. Stanley, Trustee
Address:	3217 SW 35th Blvd. Gainesville, FL 32608
<b>Contact Agent</b>	
Phone:	Fax:
(If additional owners, attach information)	

Applicant(s)/Agent(s), if different	
Name:	CHW
Address:	132 NW 76th Drive Gainesville, FL 32607
Phone:	(352) 331-1976 Fax: (352) 331-2476
(If additional agents, attach information)	

I certify that I am the owner of the property and authorize the agent listed above to initiate this development plan.

Signature of owner: \_\_\_\_\_ Date: 8/8/16

I certify that all of the information contained in this application form is accurate and up-to-date.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF FLORIDA, COUNTY OF Alachua  
Sworn to and subscribed before me this 8<sup>th</sup> day of August 20 16  
Signature – Notary Public: Kelly Jones Bishop  
Personally Known ☒ OR Produced Identification \_\_\_\_\_

**Certified Cashier's Receipt:**





**APPLICATION FOR CONCURRENCY CERTIFICATION & TMPA REVIEW  
DEPARTMENT OF PLANNING & DEVELOPMENT SERVICES**

**LONG FORM  
(352) 334-5022**

**OFFICE USE ONLY**

Petition No. \_\_\_\_\_ TMPA Zone [ ] A [ ] B [ ] C [ ] D [ ] E [ ] M

**TYPE OF CERTIFICATION REQUESTED:**

[ ] Concurrency Determination (non-binding)

[ ] Certificate of Preliminary Concurrency

[X] Certificate of Final Concurrency

[ ] Certificate of Conditional Concurrency Reservation

**Owner Name(s) (please print)**

Name(s): Robert E. Stanley, Trustee  
3217 SW 35th Blvd.  
Gainesville, FL 32608

E-Mail Address: **Contact Agent**

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

(If additional owners, please include on separate sheet)

**Agent(s) Name (please print)**

Name: CHW  
Mailing Address: 132 NW 76th Drive  
Gainesville, FL 32607

E-Mail Address: walpole@chw-inc.com

Phone: (352) 331-1976 Fax: (352) 331-2476

(Attach notarized authorization for agent to act on owner's behalf.)

**PROJECT INFORMATION**

Project Name: Butler Plaza Pod B Outlot - Bahama Breeze Phase: 1 - Total

Location of Project (attach an 8 1/2" x 11" map showing location)

1. Street address: 3006 Clark Butler Blvd.

2. Legal description (may be attached): See attached

3. Tax parcel number(s): 06810-008-004

4. Map number(s):

Existing Land Use Category: PUD

Existing Zoning: PD

Is there a proposal to change the zoning and/or land use associated with this project? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, indicate petition number(s) associated with change:

PHASING			
Is this project (phase) part of a larger project? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, enumerate each phase, number of units or square footage in each phase and beginning/ completion date.			
Total Project:	Residential units	SF	SFA MF
Non-residential (square footage) 10,734 sf			
Mixed-use (describe mix)			
(If this is a single phase project, name it Phase I – Total)			

RESIDENTIAL DATA					
Type	Phase	Number of units	Acres	Expected beginning date	Expected completion date
Single-family, detached					
Single-family, attached					
Multi-family					
Rooming houses or dormitories (beds)					
Other (specify)					

NON-RESIDENTIAL DATA					
Type(s) specify	Phase	Square footage	Acres	Expected beginning date	Expected completion date
Commercial	1 - Total	10,734 sf	1.98	Oct. 2016	Oct. 2017

**STOP HERE AND SIGN CERTIFICATION ON PAGE 3 IF YOU ARE REQUESTING ONLY A CONCURRENCY DETERMINATION**

Required Information for Certificates of Preliminary, Final, and Conditional Concurrency Reservation &TMPA Review (Attach sheets to application.)

1. Attach a sheet with the average daily, and peak hour, peak direction trip generation for the project based on the latest edition of the ITE Trip Generation Manual. (***NOTE: The trip generation information MUST be attached to this application and shown on the development plan.***) In cases where the City and the applicant show differences in projected trips, the applicant's calculations must be signed and sealed by the professional engineer registered in the State of Florida.

Application for Concurrency Certification & TMPA Review

2. Is the proposed project within the Transportation Mobility Program Area (TMPA) (see attached map)? If yes, please be aware that special criteria apply in this area. ☐ Yes ☐ No  
Zone A ☐ Zone B ☐ Zone C ☐ Zone D ☐ Zone E ☐ Zone M ☒
3. Indicate whether the proposed project will be eliminating any existing recreation facilities. If yes, detail the number and type being eliminated. ☐ Yes ☒ No
4. Submit a complete stormwater management plan for water quantity and water quality review by the City's Public Works Department. (Do not submit with this application, submit with the development plan.)
5. Does this application involve demolition or re-use of any structure(s)? ☐ Yes ☒ No

If yes, what is the size of the structure(s) to be demolished or re-used? \_\_\_\_\_ (unit(s) or square footage)

What is the current use of the structure to be demolished or re-used?  
\_\_\_\_\_

Are you claiming trip credits for the demolition or re-use of a structure(s) at the site?

☐ Yes ☒ No

If yes, provide estimates of credits for each previous use at the site. (Attach sheet with calculations.)

□ □ □ □ □

Certification

The undersigned has read the above application and is familiar with the information submitted herewith. It is agreed and understood that the undersigned will be held responsible for its accuracy. The undersigned hereby attests to the fact that the parcel number(s) and legal description(s) shown in questions 2 and 3 is/are the true and proper identification of the area for which the concurrency application is being submitted. Signatures of all owners or their agent are required on this form.

NOTE: The undersigned agrees that signing this application grants Planning staff the right to amend, for the sake of consistency, the square footage or number of units shown herein based on changes made to the development plan, subdivision, special use permit, or planned development during the review process.

Owner/Agent Signature

Date

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to and subscribed before me this 25 day of August, 2016.



Signature - Notary Public

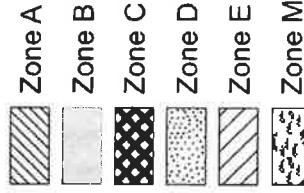
Personally Known X OR Produced Identification \_\_\_\_\_

# TRANSPORTATION MOBILITY ELEMENT

Transportation Mobility  
Program Area

## Legend

Transportation Mobility  
Program Area Sub-Zones



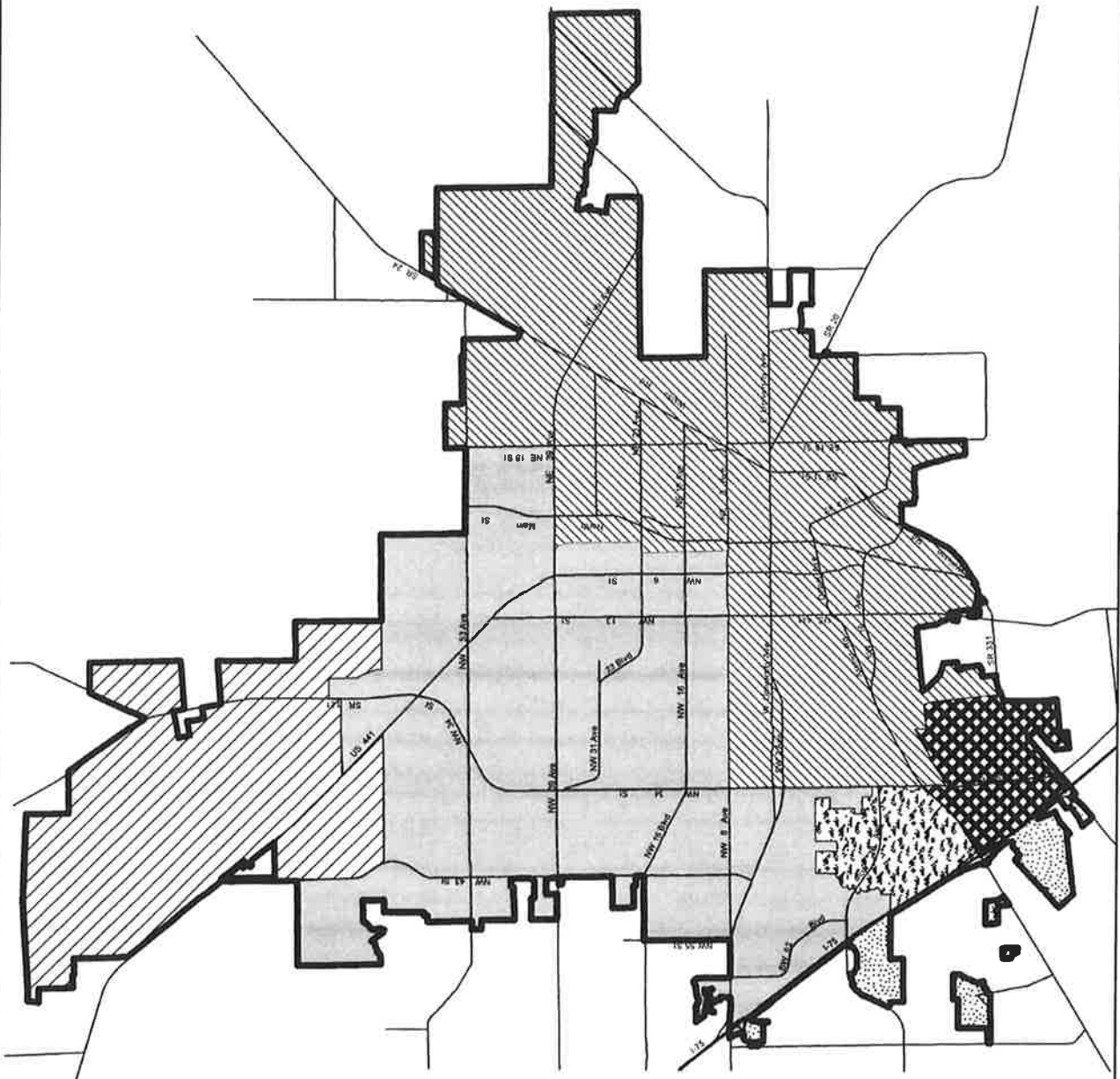
Gainesville City Limits



**City of Gainesville**  
**Gainesville, Florida**

Prepared by Planning and  
Development Services  
November 2012

0 1 2 Miles



**STAFF USE ONLY**

Estimated demand:

Potable water ( \_\_\_\_\_ units x 2.25) x 200 = \_\_\_\_\_ peak gallons per day (resid. only)

Water Supply \_\_\_\_\_ (see GRU)

Wastewater ( \_\_\_\_\_ units x 2.25) x 113 = \_\_\_\_\_ average gallons per day (resid. only)

Solid Waste ( \_\_\_\_\_ units x 2.25) x 3.6 = \_\_\_\_\_ pounds per day (resid. only)

Trip Generation \_\_\_\_\_ ADT; \_\_\_\_\_ added p.m. peak hour, peak direction trips

Stormwater	(See the Public Works Comment Sheet.)	Does the project meet water quality and water quantity LOS Standards, according to the Public Works Department?
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Recreation	_____	Does the project degrade the City's adopted LOS Standards for recreation?
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Mass Transit	_____	Does the project impact any of the City's adopted LOS Standards for mass transit?
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Estimated credits for demolition/redevelopment/re-use:

Potable water ( \_\_\_\_\_ units x 2.25) x 200 = \_\_\_\_\_ peak gallons per day (resid. only)

Water Supply \_\_\_\_\_ (see GRU)

Wastewater ( \_\_\_\_\_ units x 2.25) x 113 = \_\_\_\_\_ average gallons per day (resid. only)

Solid Waste ( \_\_\_\_\_ units x 2.25) x 3.6 = \_\_\_\_\_ pounds per day (resid. only)

Trip Generation \_\_\_\_\_ ADT; \_\_\_\_\_ peak p.m. hour, peak direction trips

Note: 2.25 = 2010 Census persons/household in Gainesville, FL

**STAFF USE ONLY**

This development meets all relevant Planning and Development Services Department LOS standards for concurrency and TMPA Review. Please see the Public Works comment sheet for information about Stormwater Management concurrency.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Concurrency long form--nf  
Revised: 10/24/13