



## LEVEL 2 CONCURRENCY REVIEW APPLICATION

**Planning and Development  
Land Development Division**  
330 W. Church St.  
P.O. Box 9005, Drawer GM03  
Bartow, FL 33831-9005  
(863)534-6449  
FAX (863) 534-5908

Applications for Concurrency Determination must be submitted with an application for commercial site plan review, and residential construction plan approval.

APPLICANT NAME	PHONE	FAX
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MAILING ADDRESS	EMAIL ADDRESS
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CONTACT PERSON (if different from applicant)	PHONE	FAX
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MAILING ADDRESS	EMAIL ADDRESS
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	Range - Township - Section -	Subdivision #	-	Parcel #
Parcel ID Number(s): (18 digits)	<u>  R  </u> <u>  T  </u> <u>  S  </u> -	_____	-	_____
	<u>  R  </u> <u>  T  </u> <u>  S  </u> -	_____	-	_____
	<u>  R  </u> <u>  T  </u> <u>  S  </u> -	_____	-	_____
	<u>  R  </u> <u>  T  </u> <u>  S  </u> -	_____	-	_____
	<i>(Include others on a separate attachment)</i>			

Project Name: \_\_\_\_\_

Project Number \_\_\_\_\_

PUD/PD #: \_\_\_\_\_  
*(If Applicable)*

ATTACHMENTS TO BE SUBMITTED WITH THIS CONCURRENCY APPLICATION

- A written and notarized owner’s authorization letter, if applicant is other than owner.
- A table listing by phase, the number of dwelling units or square feet of commercial space to be constructed, the expected starting date, and end date of each phase.
- The number of Average Annual Daily Trips (AADT) generated by project, using standards from the current edition of the Institute of Traffic Engineers (ITE) Trip Generation Manual.
  - a) If the AADT is between 50 and 750 daily trips, attach a completed Minor Traffic Review.
  - b) If the AADT is greater than 750 daily trips, a Land Development Traffic Assessment is required.

AADT Vehicle Trips Generated: \_\_\_\_\_

- Indicate the estimated potable water consumption (in Gallons per Day) for the project, and utility provider (and source or plant); attach proof of utility provision from provider (IE: a signed letter from the provider stating their commitment to provide potable water for the project), OR a copy of a well permit or permit application, or utility bill or work order for service installation.

Potable water service provider: \_\_\_\_\_

Estimated water consumption: \_\_\_\_\_

Is there an existing well on the property(ies)?

\_\_\_ YES What Type? \_\_\_\_\_

\_\_\_ NO Permitted Capacity \_\_\_\_\_

Indicate the estimated wastewater generation (in Gallons Per Day) and utility provider (and treatment plant); **attach** proof of wastewater utility provision from provider (IE: a signed letter from the provider stating their commitment to provide wastewater disposal for the project), **OR** a copy of a specific tank permit or permit application, or utility bill or work order for service installation.

Wastewater service provider: \_\_\_\_\_

Estimated wastewater generation: \_\_\_\_\_

NOTE: Please review Section 703 of the Polk County Land Development Code and the Concurrency Information Packet for the requirements of the above support documents. These documents are available through the Land Development Division. All traffic information must conform to “Appendix C” of the Land Development Code. Please note that ALL development that generates more than 50 vehicle trips per day will be required to submit a Completed Minor Traffic Review and ALL development that generates more than 750 trips per day will be required to submit a Land Development Traffic Assessment.

*Approval of this application does not waive any other applicable provisions of the Polk County Land Development Code, the Polk County Comprehensive Plan, the Polk County Utility Code which are not part of the request for this application, nor does approval waive any applicable Florida Statutes, Florida Building Code, Florida Fire Prevention Code, or any other applicable laws, rules, or ordinances, whether federal, state or local. The applicant has the obligation and responsibility to be informed of and be in compliance with all applicable laws, rules, codes and ordinances.*

I, \_\_\_\_\_ (print name), the owner of the property which is the subject of this application, or the authorized representative of owner of the property which is the subject of this application, hereby authorize representatives of Polk County to enter onto the property which is the subject of this application to perform any inspections or site visits necessary for reviewing this application. I understand that representatives of Polk County are not authorized to enter any structures dwellings which may be on the property.

\_\_\_\_\_  
Property owner, or property owner's authorized representative.

\_\_\_\_\_  
Date