



CONCEPTUAL PRE-APPLICATION

201 Central Ave. West, PO Box 1320, Lake Wales, FL 33859-1320
 Phone: (863) 678-4182 Ext. 714 - Fax: (863) 678-4050

Date: _____

Parcel Identification Number: R- _____ T- _____ S- _____ Subdivision- _____ Parcel- _____

Zoning: _____ Future Land Use: _____ Total Acres: _____

1. LOCATION:

_____ Number _____ Street _____ Zip Code _____

_____ Lot _____ Block _____ Phase _____

Project Name and brief description:

2. ACCOMPANYING MATERIAL REQUIRED: *See Section 23.222.3.a*
The applicant must submit a boundary survey or conceptual plan illustrating lot dimensions to scale, existing site conditions including stands of trees, the locations of water bodies and wetlands, existing structures and other site improvements, and a written description of the proposal.

Provide two copies of the above requested information.

3. IDENTIFICATION:

_____ Property Owner _____ Address _____ Phone _____

_____ Fax Number _____ Email Address _____

_____ Applicant/Agent _____ Address _____ Phone _____

_____ Fax Number _____ Email Address _____

_____ Signature of Owner _____ Date _____

***Approvals required (For office use only)**

Development Review Committee _____
 Administrative _____
 Planning & Zoning _____
 City Commission _____

(Fee adjusted October 1, annually)

Office Use Only

Review Fee: Cashier Payment Memo

Date: _____ 20_____

Check Number: _____

Account Number :

Code:

001-341-520-000-000

121 \$ _____