



**Town of Longboat Key  
Planning, Zoning and Building Department**

501 Bay Isles Road  
Longboat Key, Florida 34228  
941-316-1966  
941-316-1970 FAX

**ZONING EXCEPTION APPLICATION**

Application must be completed in its entirety, in ink, all signatures notarized, with thorough description of all proposed work, including supporting plans, documents, engineering, etc. Fences (excluding pool fences), walls, at-grade driveways, walkways, decks and patios, which do not require a building permit shall meet zoning criteria and shall be reviewed and approved prior to the start of work. Fire hydrants, fire sprinkler connections and fire department standpipe connections shall be visible and free from obstructions in front of and on both sides by a distance of not less than (4) four feet. Water meters and backflow preventers shall also be free from obstructions within three (3) feet. This permit does not waive any other required local, state or federal permits/approvals.

**ZONING EXCEPTION FEE: \$50.00**

IF PAYING BY CREDIT CARD, PLEASE COMPLETE A CREDIT CARD AUTHORIZATION FORM

**OFFICE USE ONLY:**

ZE No. \_\_\_\_\_ Receipt No. \_\_\_\_\_ APPROVED BY (Zoning Staff) \_\_\_\_\_

**JOB SITE:**

Street Address: \_\_\_\_\_ Unit # \_\_\_\_\_

Condominium/Complex Name: \_\_\_\_\_

Zoning Classification: \_\_\_\_\_ Site Plan Amendment/Exemption # \* \_\_\_\_\_

\*If the proposed work is on a site approved by site plan approval, a photocopy of the corresponding Site Plan Order or Site Plan Exemption is required

**PROPERTY OWNER:**

Name (as on property record): \_\_\_\_\_

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

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Zoning Classification: \_\_\_\_\_ Site Plan Amendment/Exemption # \* \_\_\_\_\_

\*If the proposed work is being done for a condominium or other property owner association, photocopies of the approval documents (i.e., board minutes, etc) authorizing the work to be completed, is required.

**APPLICANT/AGENT (if not property owner)**

Check One:  Tenant  Contractor  Other \_\_\_\_\_  
 Engineer/Surveyor  Design Professional

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

Company/Firm: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**SCOPE OF WORK**

Check One:  New  Repair/Maintain  Alteration  
Check (all applicable):  Deck  Driveway\*/Walkway  Patio  Fence/Wall

\*Driveways on Gulf of Mexico Drive shall require a photocopy of the FDOT permit.

**PROPOSED SURFACE MATERIAL**

Check (all applicable):  Natural  Concrete  Asphalt  Shell/Limestone  Gravel  Pavers  
 Other

**SITE CALCULATIONS\***

Lot Area (sq. ft.): \_\_\_\_\_

Existing Non-Open Space (sq. ft.): \_\_\_\_\_

Proposed Additional Coverage (sq. ft.): \_\_\_\_\_

Proposed Non-Open Space (sq. ft.): \_\_\_\_\_

\*If the work proposed is "new" or "alterations", a to-scale site plan/survey with revised itemized/detailed Lot Coverage and Non-Open Space calculations shall be required, accompanied by the attached *Coverage Affidavit*, to be signed by both the individual preparing the calculations, as well as the property owner. Please utilize the *New Construction & Additions Worksheet* as a guide for computing the coverages. The Town may require that site plan/survey shall be signed and sealed by a design professional or licensed surveyor, verifying the calculations are correct, if the proposed Non-Open space coverage is close to approximate maximum and/or cannot be verified by staff. If the work is "repair/maintain", a to-scale site plan/survey indicating the existing locations and dimensions of all improvement shall be required. Three (3) to-scale copies of the site plan/survey shall be submitted with the Zoning Exception application.

**FENCE DETAIL REQUIREMENTS**

Three (3) copies of a to-scale site plan/survey clearly indicating the exact location of the proposed fence are required, including setbacks from respective property lines. Details including the proposed fence design and overall height of the proposed fence shall also be submitted. Please note, fences shall comply with Section 158.102 of the Town Zoning Code.

**SIGNATURE OF PROPERTY OWNER(S)/AGENT**

(I) (WE) understand that this document becomes a part of the permanent records of the Town of Longboat Key. (I) (WE) hereby certify that the above statements and the statements or showings made in any paper or plans submitted herein are true to the best of (my) (our) knowledge and belief.

Signature of Owner \_\_\_\_\_

Printed/Typed Name of Owner \_\_\_\_\_

**In addition to Owner's signature, please complete this section if the owner designates an agent to act on their behalf in regard to this application:**

Signature of Agent \_\_\_\_\_

Printed/Typed Name of Agent \_\_\_\_\_

**NOTARIZATION OF OWNER'S SIGNATURE**

State of \_\_\_\_\_

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

By \_\_\_\_\_

Signature of Notary Public \_\_\_\_\_

Printed/Stamped Name of Notary Public \_\_\_\_\_

Personally known  OR produced identification  Type of ID \_\_\_\_\_