

Certification of Ownership (Variance)

Development Services Department – Planning & Zoning Division

City of Panama City, City Hall, 501 Harrison Avenue, 2nd Floor, Room 217, Panama City, FL 32401

Phone: 850-872-3025 | Email: planning@panamacity.gov | Website: www.panamacity.gov

By printing my name and signature below I hereby certify that I am the owner of record of the subject property described and approve of the requested action(s) herein and hereby petitions the City of Panama City for a variance. I hereby certify that the information provided in this application is true and correct, and understand that deliberate misrepresentation of such information will be grounds for denial and reversal of this application and/or revocation of any approval based on this application.

By signing below, I am agreeing that this petition is irrevocable once accepted by the City of Panama City and approval of the request by the Planning Board is not guaranteed. I understand that a variance shall run with land once established (i.e., not expired or revoked). Whenever the planning board has denied a variance, the same shall not consider any further substantially equivalent request for variance on any part of the same property for a period of 12 months from the date of such action (or date of any final court order upholding denial of the variance), unless this restriction is waived by a unanimous vote of the members of the planning board present at the time of the vote. Approval of this request does not constitute a guarantee that the project will receive approvals/permits necessary for site development as proposed will be issued, nor does it imply that other required permits needed for site development or building construction are being waived or otherwise approved. I understand that City staff may enter upon my property for the purpose of site inspection and the placement of a public notice sign (if necessary) for this application and all fees are non-refundable. The project will be required to comply with the development review approval process in addition to obtain all necessary building permits for on-site structures. I certify that an incomplete application will result in a delay in processing and a continuance to the next available Planning Board meeting. I certify that I have read and understand the application information and requirements and to my knowledge, this application is accurate and complete. I understand that an incomplete application will result in a delay in processing.

Certification of Ownership

Property Owner Name (Print): _____

Property Owner's Signature: _____

STATE OF _____ COUNTY OF _____ Sworn to and
subscribed me

this _____ day of _____, 20_____,
By _____, the applicant is personally known to

me or has produced _____ as identification. Notary Public:

My Commission Expires: _____ NOTARY STAMP: _____

Authorization of Applicant/Agent/Representative (Variance)

Development Services Department – Planning & Zoning Division

City of Panama City, City Hall, 501 Harrison Avenue, 2nd Floor, Room 217, Panama City, FL 32401

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By printing my name and signature below I hereby certify that I am the authorized agent and primary contact during the variance review process and the requested action(s) herein and hereby petitions on behalf of the owner the City of Panama City for a variance on behalf of the property owner. I hereby certify that the information provided in this application is true and correct, and understand that deliberate misrepresentation of such information will be grounds for denial and reversal of this application and/or revocation of any approval based on this application.

By signing below, I am agreeing that this petition is irrevocable once accepted by the City of Panama City and approval of the request by the Planning Board is not guaranteed. I understand that a variance shall run with land once established (i.e., not expired or revoked). Whenever the planning board has denied a variance, the same shall not consider any further substantially equivalent request for variance on any part of the same property for a period of 12 months from the date of such action (or date of any final court order upholding denial of the variance), unless this restriction is waived by a unanimous vote of the members of the planning board present at the time of the vote. Approval of this request does not constitute a guarantee that the project will receive approvals/permits necessary for site development as proposed will be issued, nor does it imply that other required permits needed for site development or building construction are being waived or otherwise approved. I understand that City staff may enter upon the property for the purpose of site inspection and the placement of a public notice sign (if necessary) for this application and all fees are non-refundable. The project will be required to comply with the development review approval process in addition to obtain all necessary building permits for on-site structures. I certify that an incomplete application will result in a delay in processing and a continuance to the next available Planning Board meeting. I certify that I have read and understand the application information and requirements and to my knowledge, this application is accurate and complete. I understand that an incomplete application will result in a delay in processing.

Owner Authorization of Applicant, Agent or Representative

*If the applicant is not the property owner and the owner is allowing the applicant to act on their behalf, a notarized signature of the owner is required.

Property Owner Name (Print): _____

Property Owner's Signature: _____

STATE OF _____ COUNTY OF _____ Sworn to and subscribed me

this _____ day of _____, 20_____, By _____, the

applicant is personally known to me or has produced _____ as identification.

Notary Public: _____

My Commission Expires: _____

NOTARY STAMP: _____

Authorized Applicant, Agent or Representative

Applicant/Authorized Agent Name (Print): _____

Applicant's Signature: _____

STATE OF _____ COUNTY OF _____ Sworn to and subscribed me

this _____ day of _____, 20_____, By _____, the

applicant is personally known to me or has produced _____ as identification.

Notary Public: _____

My Commission Expires: _____

NOTARY STAMP: _____