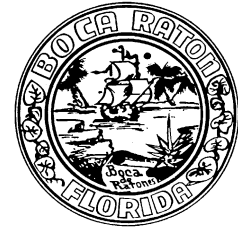


CITY OF BOCA RATON

DEVELOPMENT SERVICES DEPARTMENT



201 WEST PALMETTO PARK ROAD • BOCA RATON, FLORIDA 33432-3795
 TELEPHONE (561) 393-7789 • FAX (561) 393-7784

<h3>SHARED PARKING STUDY REVIEW</h3>		<h3>SHARED PARKING STUDY REVIEW APPLICATION</h3>	
		<p>TO ALL APPLICANTS: The following checklist is designed to assist in preparing materials for a Shared Parking Study Review. Each item included in the submission should be checked-off below. Failure to provide the required items below will render the application incomplete and delay consideration of the application.</p>	
<h3>Required Fee: \$350</h3>			
For Official Use Only	Case No.	HTE No.	
Date received:	Date completed:	Received by:	
Submitted (Please check box)		<h2>SUBMITTAL ITEMS/INFORMATION</h2>	
YES	NO		
		Statement of Use (detailed description of request or use).	
		Plans drawn in engineering scale, including north arrow and general location map.	
		Survey of the property, including easements, rights-of-way and reservations.	
		Zoning designations and Comprehensive Plan Future Land Use category.	
		Proposed use of structure and prior use, if applicable.	
		Tabulation of the required and provided parking for the existing/proposed use.	
		Typical parking stall dimensions, including handicap stalls.	
		Complete layout of parking garages, if applicable.	
		A check made payable to the City of Boca Raton in the amount of \$350.00 for Shared Parking Study Review	

APPLICANT INFORMATION

APPLICANT			
Applicant's Agent (if acting as authorized agent of a business entity)			
Relationship of Applicant to Owner			
Address			
Phone		Email	
Facsimile			
Signature		Date	
OWNER (if different from applicant)			
Address			
Phone		Email	
Facsimile			
Signature		Date	
REPRESENTATIVE			
Company/Firm			
Address			
Phone		Email	
Facsimile			
Signature		Date	

CITY OF BOCA RATON – DEVELOPMENT SERVICES

City of Boca Raton

Planning and Zoning Division



AUTHORIZED AGENT FORM

I, _____ as owner of _____
(print name of owner) (print property address)

do hereby authorize _____ to act as my agent in submitting
(print name of authorized agent)

development applications to the City of Boca Raton. I understand that I am the owner of record responsible for the development applications submitted by my agent referenced above. I further understand that each time my agent submits an application or signs any required documents, that the individual must exhibit this authorization form at the discretion of Planning and Zoning staff.

The Owner's Signature Is to Be Notarized

(Owner's Signature)

(Date)

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____,
20____, By _____, who is personally known to me () or has provided the following
identification _____

Notary Public Signature _____ Notary Public Stamp Here