

Notice to Applicants for Concurrency Applications

Brevard County Preliminary Concurrency Applications must be submitted and approved prior to Application for Site Plan, Driveway Permit, Right of Way Permit or Pre-Application for Subdivision.

Instructions for preliminary Concurrency application

All applications shall include:

- Concurrency Application Form
- Potable Water Service Capacity Availability or Capacity Reservation Form (your choice, we recommend reservation)
- Sanitary Sewer Service Capacity Availability or Capacity Reservation Form (your choice, we recommend reservation)
- Solid Waste Capacity Reservation Form
- 1 copy of Site Plan or Subdivision Plat
- Fee of \$175.00 (payable to Brevard County Board of Commissioners)

Sanitary Sewer Service Capacity Availability Certificate or Capacity Reservation Form

Applicant shall fill out information on certificate sections I, II and III and bring it to the agency, that provides sewer for that location, (Brevard County Utilities, City of Melbourne, etc.). An authorized representative of the sewer agency must sign the certificate before it is submitted for Concurrency evaluation.

For projects, which will utilize a septic tank or on-site package plant, an authorized representative of the Brevard County Health Department, Environmental Health Services (Government Center Bldg. A), should sign the certificate. For projects which have existing public sewer and which will not generate additional flow, a copy of the account statement will be accepted in lieu of the certificate.

Potable Water Service Capacity Availability Certificate or Capacity Reservation Form

Applicant shall fill out information on certificate sections I, II, & III and bring it to the agency, that provides water for that location, (City of Cocoa, City of Melbourne, etc.). An authorized representative of the water agency must sign the certificate before it is submitted for Concurrency evaluation.

For projects, which will utilize a private well, the applicant, under Item V, Private Wells, should sign the certificate. For projects which have existing public water and which will not generate additional flow, a copy of the account statement will be accepted in lieu of the certificate.

NOTE: Capacity Availability Certificates are valid only for preliminary conditional approvals. For projects, which will reserve capacity, including all building permits, Capacity Reservations or paid connection receipts are required.

Solid Waste Capacity Reservation Certificate

Applicant shall fill out information on certificate sections I, II and III and bring or FAX it to the Brevard County Solid Waste Management Department, 2725 Judge Fran Jamieson Way, Bldg. Suite A114, Viera, FL 32940, Phone (321) 633-2042, FAX: (321) 633-2074.

An authorized representative of the Brevard County Solid Waste Department must sign the certificate before it is submitted for Concurrency evaluation.

NOTE: A Solid Waste Capacity Reservation Certificate is valid for a specific time frame as determined by the authorized representative of the Brevard County Solid Waste Department.

Please allow 48 hours for the processing of your preliminary Concurrency Application.

The applicant shall pick up and sign for completed reviews unless other arrangements are made in advance.

Preliminary Concurrency Findings of Non-Deficiency without reservation remain valid for a period of 6 months.



BOARD OF COUNTY COMMISSIONERS

Planning & Development Department
2725 Judge Fran Jamieson Way, Bldg A, Suite 114
Viera, FL 32940
Phone: (321) 633-2070, Fax: (321) 633-2074
www.BrevardFL.gov/PlanningDev

APPLICATION FOR CONCURRENCY EVALUATION

OFFICE USE ONLY

District # Segment # Review #

NOTE: This application together with all required attachments shall be completed and submitted to the Planning & Development Department for Evaluation. The Project must have Concurrency Approval prior to making application for Site Plan, Subdivision Plat, Driveway Permit and/or a Right of Way Use Permit Submittal. A finding of Non-Deficiency only entitles the owner/applicant to apply for development permits pursuant to the time parameters established in the Concurrency Evaluation Ordinance (91-36).

Owner Name

Owner Address

Home Phone # Work Phone #

Email

Applicant/Company Name

Engineer

Address

Phone # Fax #

Email

Property Description

Table with 6 columns: Township, Range, Section, Subdivision#, Block/Parcel, Lot. Below it are labels for Acreage, Zoning, and Tax Parcel ID, Legal.

Proposed Development Information/Potential

Site plan submittal or Amendment Project Name
Subdivision plat submittal Nearest major road

Residential Uses (check all that apply)

- Single-Family Houses Detached _____ du
- Single-Family Homes Attached (duplex, triplex, condo, townhome) _____ du
- Multi-Family Apartments (4 or more units/buildings) _____ du
- Mobile/Manufactured Homes (lots & or acreage) _____ du
- Recreational Homes (lots/sites & or acreage) _____ du

Non-Residential Uses (check all that apply)

- Bank (with or without drive-through) _____ sf
- Church (all uses except classroom space) _____ sf
- Convenience store (with gas sales, or without gas) _____ sf # of fueling positions/hoses _____
- Hotel/Motel (# of rooms) _____ rm
- Office _____ sf
- Retail _____ sf
- Restaurant (sit down indoor &/or outdoor seating) _____ sf
- Restaurant (fast food with drive-through or without) _____ sf
- Warehouse _____ sf
- ACLF &/or Nursing Home _____ beds or rooms
- Other _____ Size _____

Note: If project will be phased, or has multiple buildings, please give a breakdown showing the type and number of units in each phase or building. Phase # / Building #

OFFICE USE ONLY

- Fee of \$175 in Cash or Check # _____ drawn to the order of Brevard County BOCC
- Potable Water Certificate or Reservation Provider _____ Expires _____
- Sanitary Sewer Certificate or Reservation Provider _____ Expires _____
- Solid Waste Certificate or Reservation Provider _____ Expires _____
- 1 Copy of Site Plan, Subdivision Plan or Concept Drawing with a General Statement
- Received by _____ Date _____ Receipt _____
- A finding of Non-Deficiency
- Applicant must Apply for and Receive Approval for Site Plan, Subdivision Plat, Driveway Permit and/or a Right of Way Use Permit with the Land Development Office prior to _____
- APPROVED CONDITIONALLY
- Exempt per _____
- A Finding of Deficiency
- DEFERRED OR DENIED

Reviewed by _____ Date _____ Title _____

White: Office Original

Yellow: Land Development Copy

Pink: Applicant Copy

POTABLE WATER SERVICE
CAPACITY AVAILABILITY CERTIFICATE

This certificate is issued for the purpose of verifying that potable water service is available pursuant to Section 163.3202 (2) (g), Florida Statutes. However, this certificate in no way reserves capacity for the project or property described below and is issued for conditional Site Plan, Subdivision, or building permit approval only.

I. Unit of Government or Entity Issuing Certificate _____

II. Applicant/Owner Information

Owner Name _____

Address _____

Home Phone # _____ Work # _____

Applicant Name _____

Address _____

Home Phone # _____ Work # _____

III. Legal Description and Development Proposal

Township Range Section Subdivision# Block/Parcel Lot

Subdivision Name _____

Site Acreage _____ Zoning Classification _____

If Residential: Type of Residential _____ Maximum Number of Dwelling Units _____

If Non-Residential: Specific Uses _____ Square Footage _____

IV. Availability of Potable Water Service

The Following potable water capacities are available as of the date of this application.

_____ # of units or equivalent non-residential units

_____ gallons/day @ 250 gallons/residential unit/day

Affected Facility _____

___ As of the date of this evaluation sufficient capacity is available for the project described in Sections III & IV.

___ As of the date of this application, potable water capacities *are not* available.

Signature and Title Jurisdiction Date

V. The subject property is in an area not served by public water supply system and will be utilizing a private well. Location of said wells must be shown on site plan.

Signature and Title Jurisdiction Date

POTABLE WATER SERVICE

CAPACITY RESERVATION CERTIFICATE

This certificate is issued for the purpose of verifying that potable water service is available pursuant to Section 163.3202 (2) (g), Florida Statutes and that potable water service capacity is reserved for a specific time for the development of the property in Section III of this certificate.

I. Unit of Government or Entity Issuing Certificate _____

II. Applicant/Owner Information

Owner Name _____

Address _____

Home Phone # _____ Work # _____

Applicant Name _____

Address _____

Home Phone # _____ Work # _____

III. Legal Description and Development Proposal

Township	Range	Section	Subdivision#	Block/Parcel	Lot
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Subdivision Name _____

Site Acreage _____ Zoning Classification _____

If Residential: Type of Residential _____ Maximum Number of Dwelling Units _____

If Non-Residential: Specific Uses _____ Square Footage _____

IV. Capacity Reservation for Potable Water Service

The Following potable water capacities are reserved for the period of time specified herein or until capacity consumption begins. Failure to utilize the reserved capacity within the specified timeframe shall require a new concurrency evaluation.

_____ # of units or equivalent non-residential units

_____ gallons/day @ 250 gallons/residential unit/day

Reservation Period Beginning _____ Ending _____

Affected Facility _____ Government Jurisdiction _____

Capacity reservations for potable water service are hereby certified for use by the applicant for the specified reservation period.

Signature and Title	Jurisdiction	Date
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V. The property is in an area not served by a public water supply system and will be utilizing a well.

Signature and Title	Jurisdiction	Date
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**SANITARY SEWER SERVICE
CAPACITY AVAILABILITY CERTIFICATE**

This certificate is issued for the purpose of verifying that sanitary sewer service is available pursuant to Section 163.3202 (2) (g), Florida Statutes. However, this certificate in no way reserves capacity for the project or property described below and is issued for conditional Site Plan, Subdivision, or building permit approval only.

I. Unit of Government or Entity Issuing Certificate _____

II. Applicant/Owner Information

Owner Name _____

Address _____

Home Phone # _____ Work # _____

Applicant Name _____

Address _____

Home Phone # _____ Work # _____

III. Legal Description and Development Proposal

Township	Range	Section	Subdivision#	Block/Parcel	Lot
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Subdivision Name _____

Site Acreage _____ Zoning Classification _____

If Residential: Type of Residential _____ Maximum Number of Dwelling Units _____

If Non-Residential: Specific Uses _____ Square Footage _____

IV. Availability of Sanitary Sewer Service

The Following sanitary sewer capacities are available as of the date of this application.

_____ # of units or equivalent non-residential units

_____ gallons/day @ 250 gallons/residential unit/day

Affected Facility _____

___ As of the date of this evaluation sufficient capacity is available for the project described in Sections III & IV.

___ As of the date of this application, sanitary sewer capacities *are not* available.

Signature and Title	Jurisdiction	Date
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V. The subject property is in an area not served by public sewer supply system and will be utilizing an on-site sewage disposal/septic tank.

___ This site is or can be made suitable for the use of an on-site sewage disposal system.

___ This site is currently serviced by an on-site sewage disposal system, which is adequate to handle the proposed new development described above.

Signature and Title	Jurisdiction	Date
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SANITARY SEWER SERVICE
CAPACITY RESERVATION CERTIFICATE

This certificate is issued for the purpose of verifying that sanitary sewer service is available pursuant to Section 163.3202 (2) (g), Florida Statutes and that sanitary sewer service capacity is reserved for a specific time for the development of the property in Section III of this certificate.

I. Unit of Government or Entity Issuing Certificate _____

II. Applicant/Owner Information

Owner Name _____

Address _____

Home Phone # _____ Work # _____

Applicant Name _____

Address _____

Home Phone # _____ Work # _____

III. Legal Description and Development Proposal

Township Range Section Subdivision# Block/Parcel Lot

Subdivision Name _____

Site Acreage _____ Zoning Classification _____

If Residential: Type of Residential _____ Maximum Number of Dwelling Units _____

If Non-Residential: Specific Uses _____ Square Footage _____

IV. Capacity Reservation for Sanitary Sewer Service

The Following sanitary sewer capacities are reserved for the period of time specified herein or until capacity consumption begins. Failure to utilize the reserved capacity within the specified timeframe shall require a new concurrency evaluation.

_____ # of units or equivalent non-residential units _____ gallons/day @ 250 gallons/residential unit/day

Reservation Period Beginning _____ Ending _____

Affected Facility _____ Government Jurisdiction _____

Capacity reservations for sanitary sewer service are hereby certified for use by the applicant for the specified reservation period.

Signature and Title Jurisdiction Date

V. The subject property is in an area not served by public sewer supply system and will be utilizing an on-site sewage disposal/septic tank.

___ This site is or can be made suitable for the use of an on-site sewage disposal system.

___ This site is currently serviced by an on-site sewage disposal system, which is adequate to handle the proposed new development described above.

Signature and Title Jurisdiction Date

**SOLID WASTE
CAPACITY RESERVATION CERTIFICATE**

This certificate is issued for the purpose of verifying that adequate solid waste capacity is available pursuant to Section 163.3202(2)(g), Florida Statutes, and the solid waste capacity is reserved for a specific time for the development of the property as described in Section III of this certificate.

I. Unit of Government or Entity Issuing Certificate: BREVARD COUNTY SOLID WASTE MANAGEMENT

II. Applicant/Owner Information

Owner Name _____

Address _____

Home Phone # _____ Work # _____

Applicant Name _____

Address _____

Home Phone # _____ Work # _____

III. Legal Description and Development Proposal

Township	Range	Section	Subdivision#	Block/Parcel	Lot
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Subdivision Name _____

Site Acreage _____ Zoning Classification _____

If Residential: Type of Residential _____ Maximum Number of Dwelling Units _____

If Non-Residential: Specific Uses _____ Square Footage _____

IV. Capacity Reservation for Solid Waste

The following solid waste capacity is reserved for the period of time specified herein or until capacity consumption begins. Failure to utilize the reserved capacity within the specified time frame shall require a new concurrency evaluation.

_____ tons/year DEVELOPMENT ORDER _____

Reservation Period: Beginning _____ Ending _____

Affected Facility: **BREVARD COUNTY LANDFILL**

Governmental Jurisdiction: Brevard County Solid Waste Management Department
2725 Judge Fran Jamieson Way
Viera, FL 32940
(321) 633.2042 FAX: (321) 633.2038

Capacity reservations for solid waste facilities are hereby, certified for use by the applicant for the specified reservation period.

Signature and Title

Date