



APPLICATION FOR ADMINISTRATIVE INTERPRETATION OF LAND USE MAP BOUNDARIES (L.U.M.B.)

Application Number: _____ Date Received: _____

1. Applicant Name: _____
Address: _____
City, State, Zip: _____
Phone Number: _____ Fax Number: _____
Email: _____

2. Property Owner*: _____
**If other than Applicant, attach notarized letter authorizing applicant to seek interpretation for owner)*

3. Street address and common description of property location:

4. Legal description and/or STRAP number: _____

5. Size of property: _____ Present use of property: _____

6. What is Land Use Map Boundary in question: _____

7. Narrative statement detailing the land use category/categories under clarification and describing the need for clarification.

PLEASE SUBMIT ANY AND ALL DOCUMENTS WHICH JUSTIFY YOUR POSITION ON THE LUMB. THE BURDEN OF PROOF IS ON YOU AS THE APPLICANT. ANY APPEAL OF THE ADMINISTRATIVE DECISION TO THE BOARD OF COUNTY COMMISSIONERS IS LIMITED TO THE RECORD CREATED IN THIS SUBMISSION TO STAFF. IT IS THEREFORE NECESSARY FOR YOU TO CREATE YOUR ENTIRE RECORD THROUGH THE COMPLETION OF THIS APPLICATION WITH ANY NECESSARY ATTACHMENTS.

I HEREBY SWEAR AND AFFIRM that the above and foregoing Application for Administrative Interpretation regarding Clarification of Land Use Map Boundaries submitted on _____ (date) is true and correct.

Signature of Applicant

STATE OF FLORIDA
COUNTY OF LEE

The foregoing instrument was sworn to (or affirmed) and subscribed before me on _____ (date) by _____ (name of person providing oath or affirmation), who is personally known to me or who has produced _____ (type of identification) as identification.

Notary Public