

CITY OF TAMPA
PLANNING & DEVELOPMENT
ARCHITECTURAL REVIEW COMMISSION

TO BE COMPLETED BY ARCHITECTURAL REVIEW & HISTORIC PRESERVATION STAFF

ARC# _____ Receipt No. _____ Date Received _____ Verification Legal Description
Public Hearing Date _____ HPDRC Date _____ HPDRC Time _____ Initials: _____

BUILDING/PROPERTY ADDRESS: _____

PROPERTY OWNER OF RECORD: _____

DAYTIME
PHONE: _____

OWNER MAILING ADDRESS: _____

FAX: _____

CITY, STATE: _____

Email: _____

ZIP CODE: _____

PAGER/CELL: _____

AUTHORIZED AGENT*: _____

Email: _____

COMPANY: _____

FAX: _____

AGENT ADDRESS: _____

DAYTIME

PHONE: _____

PAGER/CELL: _____

CITY, STATE: _____

ZIPCODE: _____

ZONING DISTRICT: _____

TAX FOLIO NUMBER: _____

CURRENT USE: _____

PROPOSED USE: _____

APPROXIMATE: Gross Square Footage _____ (including parking garage, porches, and overhangs on all floors)

LEGAL: BLOCK _____ LOTS _____ SUBDIVISION _____

Hyde Park ___ Seminole Heights ___ Tampa Heights ___ Local Landmark ___ National Landmark ___

WORK PROPOSED: _____

VARIANCES/ADMINISTRATIVE APPEALS**: _____

I hereby certify that the information on this application is true and complete.

SIGNED (Property Owner/Agent)

SIGNED (Property Owner/Agent)

Sworn to and subscribed before me this
_____ day of _____, 20_____.

Notary Public, State of Florida

My Commission Expires: _____

** PLEASE NOTE: Reducing setbacks to the property lines could impact the type of construction required for compliance with Building & Fire Codes. For more information, call the Construction Services Division at 274-3100.

Please check the Plat, Survey, Title Policy and all other documentation relating to your property prior to design and construction. The City of Tampa and its staff **DO NOT** review for compliance with individual private deed restrictions and covenants during permit review. The issuance of a building permit by the City of Tampa signifies that the project is in compliance with the zoning codes of the City of Tampa and City of Tampa and Florida building code. The issuance of a building permit **DOES NOT** insure compliance with private deed restrictions or covenants.

DATE: _____

**CITY OF TAMPA
PLANNING & DEVELOPMENT
ARCHITECTURAL REVIEW COMMISSION
EXHIBIT A-2
BUILDING COMPONENTS AND MATERIAL LIST**

<p>FOUNDATION (indicate materials)</p> <p><input type="checkbox"/> pier _____</p> <p><input type="checkbox"/> continuous _____</p> <p><input type="checkbox"/> slab on grade</p> <p><input type="checkbox"/> other _____</p> <p>_____</p> <p>EXTERIOR WALL MATERIAL (indicate type & size)</p> <p><input type="checkbox"/> wood siding</p> <p><input type="checkbox"/> brick</p> <p><input type="checkbox"/> stucco _____</p> <p><input type="checkbox"/> shingles</p> <p><input type="checkbox"/> other _____</p> <p>_____</p> <p>TRIM(indicate type, size & material)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>WINDOWS(indicate type & size)</p> <p><input type="checkbox"/> casement</p> <p><input type="checkbox"/> double hung</p> <p><input type="checkbox"/> fixed pane</p> <p><input type="checkbox"/> glazing _____</p> <p><input type="checkbox"/> shutters</p> <p><input type="checkbox"/> awnings (indicate materials)</p> <p>_____</p> <p>_____</p>	<p>ROOF(indicate type & material)</p> <p><input type="checkbox"/> tile</p> <p><input type="checkbox"/> shingle</p> <p><input type="checkbox"/> metal</p> <p><input type="checkbox"/> built-up-roof</p> <p><input type="checkbox"/> soffit</p> <p><input type="checkbox"/> other _____</p> <p>_____</p> <p>PORCH(indicate materials)</p> <p><input type="checkbox"/> columns/ supports</p> <p><input type="checkbox"/> railings</p> <p><input type="checkbox"/> ceilings</p> <p><input type="checkbox"/> ornamentation</p> <p><input type="checkbox"/> other _____</p> <p>LANDSCAPE ELEMENTS (indicate materials)</p> <p><input type="checkbox"/> planters</p> <p><input type="checkbox"/> fences</p> <p><input type="checkbox"/> retaining walls</p> <p><input type="checkbox"/> other _____</p> <p>FIRST FLOOR ELEVATION</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>GARAGE DOORS</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>TYPE OF WORK</p> <p><input type="checkbox"/> addition</p> <p><input type="checkbox"/> new sign</p> <p><input type="checkbox"/> demolition</p> <p><input type="checkbox"/> exterior remodeling/ repairs</p> <p><input type="checkbox"/> new construction</p> <p><input type="checkbox"/> relocation</p> <p><input type="checkbox"/> roof repair/ replace</p> <p><input type="checkbox"/> site improvements</p> <p><input type="checkbox"/> new fence</p> <p><input type="checkbox"/> driveway</p> <p><input type="checkbox"/> sign</p> <p><input type="checkbox"/> variance</p> <p><input type="checkbox"/> other _____</p> <p>DOORS(indicate type & size)</p> <p>Wood:</p> <p><input type="checkbox"/> panel</p> <p><input type="checkbox"/> french</p> <p><input type="checkbox"/> screen</p> <p><input type="checkbox"/> sliding glass</p> <p><input type="checkbox"/> other _____</p> <p>SIGN</p> <p><input type="checkbox"/> wall</p> <p><input type="checkbox"/> ground</p> <p><input type="checkbox"/> pylon</p> <p><input type="checkbox"/> window</p> <p><input type="checkbox"/> encroachment</p> <p>STREET FURNITURE Describe _____</p> <p>_____</p> <p>_____</p>
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The aforementioned represents the building components and materials being proposed for ARC _____.
Any changes will be approved by the Architectural Review Commission.

Owner or authorized agent

**CITY OF TAMPA
PLANNING & DEVELOPMENT
ARCHITECTURAL REVIEW COMMISSION
EXHIBIT B
AFFIDAVIT TO AUTHORIZE AGENT**

STATE OF FLORIDA - COUNTY OF HILLSBOROUGH

_____ who reside(s) at
(NAME OF ALL PROPERTY OWNERS)

_____ (ADDRESS: STREET, CITY, STATE, ZIP) _____ (PHONE NUMBER)

being first duly sworn, depose(s) and say(s):

1. That (I am/we are) the owner(s) and record title holder(s) of the following described property:
Address or General location _____

2. That this property constitutes the property for which a request for a: (NATURE OR REQUEST)

_____ is being applied to the Architectural Review Commission, Tampa, Florida;

3. That the undersigned (has/have) appointed and (does/do) appoint: Name _____
Address _____ Phone(_____) _____
as (his/their) agent(s) to execute any petitions or other documents necessary to affect such petition;

4. That this affidavit has been executed to induce the City of Tampa, Florida to consider an act on the above described property;

5. That (I/we), the undersigned authority, hereby certify that the foregoing is true and correct.

SIGNED (Property Owner)

SIGNED (Property Owner)

SIGNED (Property Owner)

SIGNED (Property Owner)

Sworn To and Subscribed before me
this _____ day of _____,
20____.

My Commission Expires:

NOTARY PUBLIC

Please check the Plat, Survey, Title Policy and all other documentation relating to your property prior to design and construction. The City of Tampa and its staff **DO NOT** review for compliance with individual private deed restrictions and covenants during permit review. The issuance of a building permit by the City of Tampa signifies that the project is in compliance with the zoning codes of the City of Tampa and City of Tampa and Florida building code. The issuance of a building permit **DOES NOT** insure compliance with private deed restrictions or covenants.

**CITY OF TAMPA
PLANNING & DEVELOPMENT
ARCHITECTURAL REVIEW COMMISSION
EXHIBIT C1
STATEMENT OF VARIANCE HARDSHIP**

(NAME OF ALL PROPERTY OWNERS), depose(s) and say(s):

A. That (I am/we are) the owner(s) or authorized agent of the following described property:

ADDRESS OR GENERAL

LOCATION _____

B. That this property constitutes the property for which a variance is requested according to Petition Number:

ARC _____;

C. The following information is provided to establish that the requested variance meets the hardship criteria stated in Chapter 27, Section 27-114(d) of the City of Tampa Code of Ordinances.

(1) The alleged hardships or practical difficulties are unique and singular with respect to the property, or with respect to a structure or building thereon, and are not those suffered in common with other properties, structures, or buildings similarly located.

Response: _____

(2) The hardship or practical difficulty does not result from the actions of the applicant. A self-created hardship or practical difficulty shall not justify a variance.

Response: _____

(3) The variance, if granted, will not substantially interfere with or injure the health, safety, or welfare of others whose property would be affected by allowance of the variance.

Response: _____

(4) The variance is in harmony with, and serves the general intent and purpose of, this chapter and the adopted Tampa Comprehensive Plan.

Response: _____

(5) Allowing the variance will result in substantial justice being done, considering both the public benefits intended to be secured by this chapter and the individual hardships or practical difficulties that will be suffered due to a failure of the board to grant a variance.

Response: _____

(6) The variance, if granted, will allow development that is consistent with the design standards and compatible with the historic pattern of development within the historic district, historic conservation overlay district, multiple property designation, or the locally designated landmark or landmark site in which the subject property is located.

Response: _____

D. That this document is attached to and made a part of the variance request.

E. That (I, we) the undersigned authority hereby certify that the foregoing is true and correct.

PETITIONER (Owner or Authorized Agent--Circle One)

Date

CITY OF TAMPA
PLANNING & DEVELOPMENT
ARCHITECTURAL REVIEW COMMISSION
EXHIBIT E
GOOD NEIGHBOR NOTICE FOR ARC VARIANCE

ARC _____

Date _____

Public Hearing by Architectural Review Commission

VARIANCE - Check appropriate Request(s):

- Building Separation From ___ feet to ___ feet (eave to eave)
Front Yard Setback* From ___ feet to ___ feet with an encroachment of ___ feet for the eaves/gutters
Rear Yard Setback* From ___ feet to ___ feet with an encroachment of ___ feet for the eaves/gutters
Side Yard Setback* From ___ feet to ___ feet with an encroachment of ___ feet for the eaves/gutters
Side Yard Setback* From ___ feet to ___ feet with an encroachment of ___ feet for the eaves/gutters
Corner Yard Setback* From ___ feet to ___ feet with an encroachment of ___ feet for the eaves/gutters
Fireplace From ___ feet to ___ feet
Other From ___ feet to ___ feet
Structure Height Variance From ___ feet to ___ feet
Fence Height Variance From ___ feet to ___ feet
Number of Parking Spaces From ___ to ___
Sign From ___ feet to ___ feet
Tree/Wetlands
Administrative Appeal Section _____ (the public may attend, but no public input is permitted)
Other

DESCRIBE WORK PROPOSED: _____

PROPERTY OWNER/AUTHORIZED AGENT: _____

ADDRESS & LEGAL DESCRIPTION OF PROPERTY: _____

* All yards which have been reduced cannot have any architectural feature encroaching into the yard with out showing such encroachment on the submitted plan. Architectural features include, but are not limited to, eaves, gutters, fireplaces and bay windows.

Dear Property Owner:

Please be advised that the Architectural Review Commission of the City of Tampa will hold a public hearing on (date) _____, at 6:00 P.M. at 315 E. Kennedy Blvd., 3rd Floor, City Council Chambers, Tampa Florida, at which public hearing all parties in interest and citizens may appear and be heard as to any and all matters pertinent to the petition as described above. Please contact me at _____ (phone) should you have any questions concerning this petition.

As public hearings are occasionally cancelled or postponed, confirmation of the time and date of the public hearing can be obtained by calling the petitioner four (4) days before the public hearing date.

Sincerely,

PETITIONER (Owner or Authorized Agent - Circle one)

"Any person who decides to appeal the decision of City Council with respect to this matter will need a record of the proceedings, and for such purpose, may need to hire a court reporter to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based."

"In accordance with the Americans with Disabilities Act and Section 286.26, Florida Statutes, persons with disabilities needing special accommodations to participate in this meeting should contact the City Clerk's office at least forty-eight (48) hours prior to the date of the meeting."

CITY OF TAMPA
PLANNING & DEVELOPMENT
ARCHITECTURAL REVIEW COMMISSION
EXHIBIT F

AFFIDAVIT ATTESTING TO NOTIFICATION

(NAME OF ALL PROPERTY OWNERS), being first duly sworn, depose(s) and say(s):

1. That (I am/we are) the owner(s) and record title holder(s) of the following described property:
ADDRESS OR GENERAL LOCATION: _____

2. That this property is the property for which a variance/administrative appeal request is being made for
ARC _____.
- 3.a. That a copy of the notice was sent by **Certificate of Mailing** on _____ (date) to the property owners
within 250 feet of the subject property (including streets and street right-of-ways), Registered Home Owner
Associations, and a copy of the attached letter has been made part of this affidavit. The "Certificate of Mailing"
receipts have been postmarked by the Post Office and turned in to the Historic Preservation office.
- b. That the "Certificate of Mail" for the indicated notices are attached and made a part of this affidavit.
- c. That the sign provided to me by the Architectural Review & Historic Preservation Office was posted in a conspicuous
place near the front of the property a minimum of thirty (30) days prior to the ARC Public Hearing. Attached and
made a part of this Affidavit are the two photographs. One depicting the location and its proximity to the street
frontage, one showing the visible language on the notification sign.
4. That (I, we) the undersigned authority, hereby certify that the foregoing is true and correct.

PETITIONER (Owner or Authorized Agent
- circle one)

PETITIONER (Owner or Authorized Agent
- circle one)

Sworn To and Subscribed before me
this _____ day of _____,
20____.

My Commission Expires:

NOTARY PUBLIC, STATE OF FLORIDA

Received & Approved By: _____	Date: _____
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