

**CITY OF TAMPA
PLANNING & DEVELOPMENT
BARRIO LATINO COMMISSION
EXHIBIT A-1**

TO BE COMPLETED BY ARCHITECTURAL REVIEW & HISTORIC PRESERVATION STAFF

BLC# _____ Public Hearing Date _____ Receipt No. _____ Date Received _____

Verification Legal Description Date: _____ Initials: _____ Property Ownership Date: _____ Initials: _____

BUILDING/PROPERTY ADDRESS: _____

PROPERTY OWNER OF RECORD: _____

**DAYTIME
PHONE:** _____
FAX: _____

CONTACT PERSON: _____

Email: _____
PAGER/CELL: _____

ADDRESS: _____

CITY, STATE: _____ **ZIPCODE:** _____

AUTHORIZED AGENT*: _____ **Email:** _____

FAX: _____

COMPANY: _____

DAYTIME

ADDRESS: _____

PHONE: _____

PAGER/CELL: _____

CITY, STATE: _____ **ZIPCODE:** _____

ZONING DISTRICT: _____ **TAX FOLIO NUMBER:** _____

CURRENT USE: _____ **PROPOSED USE:** _____
(# AND TYPE OF BUILDINGS)

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

LEGAL: BLOCK _____ **LOTS** _____ **SUBDIVISION** _____

WORK PROPOSED: _____

VARIANCES/ADMINISTRATIVE APPEALS:** _____

The Barrio Latino Commission will act on complete applications only. The owner and/or agent are required to attend both the Design Review Committee Meeting and the Public Hearing. All presentations are to be made as delineated in "Submission to the Barrio Latino Commission."

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: _____

*Designation of Authorized Agent requires completion of Exhibit B, Affidavit to Authorize Agent.

** 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.

"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
BARRIO LATINO 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</p> <p>Describe _____</p> <p>_____</p> <p>_____</p>
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The aforementioned represents the building components and materials being proposed for BLC _____.
Any changes will be approved by the Architectural Review Commission .

Owner or authorized agent

Date: _____

**CITY OF TAMPA
PLANNING & DEVELOPMENT
BARRIO LATINO COMMISSION
EXHIBIT B**

AFFIDAVIT TO AUTHORIZE AGENT

STATE OF FLORIDA - COUNTY OF HILLSBOROUGH

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

_____ (PHONE
(ADDRESS: STREET, CITY, STATE, ZIP) 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 Barrio Latino 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

**CITY OF TAMPA
PLANNING & DEVELOPMENT
BARRIO LATINO COMMISSION
EXHIBIT C1**

STATEMENT OF VARIANCE HARDSHIP

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

1. That (I am/we are) the owner(s) or authorized agent of the following described property:
ADDRESS OR GENERAL
LOCATION _____

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

3. The following information is provided to establish that the requested variance meets the hardship criteria
stated in Chapter 27, Section 27-95(i)(3)(b) of the City of Tampa Code of Ordinances.

(i) The alleged hardships or practical difficulties are unique and singular as regards the property of the person
requesting the variance and are not those suffered in common with other property similarly located.

Response: _____

(ii) The alleged hardships or practical difficulties which would result from failure to grant the variance extend to
the inability to use the land in question for any use in conformity with the provisions of this chapter and include
substantially more than mere inconvenience and inability to obtain a higher financial return.

Response: _____

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

Response: _____

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

Response: _____

(v) 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 that will be suffered due to a failure of the
board to grant a variance.

Response: _____

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

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

PETITIONER (Owner or Authorized Agent--Circle One)

BLCVApEx C1

**CITY OF TAMPA
PLANNING & DEVELOPMENT
BARRIO LATINO COMMISSION
EXHIBIT E**

GOOD NEIGHBOR NOTICE

_____ date

BLC _____

Public Hearing by Barrio Latino 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
- _____ From _____ feet to _____ feet
- _____ From _____ feet to _____ feet
- 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 _____
- 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 Barrio Latino Commission of the City of Tampa will hold a public hearing on **(date)** _____, at 9:00 A.M. at 315 E. Kennedy Boulevard, 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
BARRIO LATINO 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, relocation, demolition or administrative appeal request*** is being made for BLC _____.
- 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), 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 Architectural Review & 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 BLC 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, and 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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