



CITY OF TAMPA
PLANNING AND DEVELOPMENT
LAND DEVELOPMENT COORDINATION
GUIDELINES FOR SUBMITTING AND PROCESSING

SPECIAL USE 1 APPLICATION FOR SPORTS AND ENTERTAINMENT VENDORS

NOTE: Please be aware that these guidelines are intended only as a guide to assist you in submitting your Special Use 1 (S-1) application. **These guidelines are derived from Chapter 27 of the City Code. Please refer to the Code for any concerns or clarifications regarding these guidelines.**

I. PRE-APPLICATION CONFERENCE

Prior to submittal of a Special Use 1 (S-1) application, it is strongly recommended that the applicant schedule a complimentary conference with a staff member from the Land Development Coordination Division. The purpose of the conference is to advise the applicant regarding the review standards and process for the application.

II. MINIMUM REQUIREMENTS FOR APPLICATION

- A. COMPLETE ORIGINAL APPLICATION FORM.
- B. APPLICATION FEES: \$27.50 - bank check, money order, Visa/Mastercard (PERSONAL CHECKS AND CASH NOT ACCEPTED).
- C. SITE PLAN: Please provide a site plan, survey or an aerial photograph of the site showing the location of your business and/or tent, vending cart or vending vehicle.

III. SUBMITTAL OF AN APPLICATION The application and all information required in item II above shall be submitted in person to:

Land Development Coordination Division
1400 North Boulevard
Tampa, Florida 33607

IV. REVIEW AND DECISION BY ZONING ADMINISTRATOR

A. REVIEW: The Land Development Coordination Division will certify the application when it has been determined that all information on the application, including the legal description, is correct and complete. The Zoning Administrator will evaluate the proposed Special Use for compliance with the applicable requirements of the Code.

B. APPROVAL: If the applicant meets all of the applicable requirements of the Code, the Zoning Administrator will approve the Special Use and notify the applicant in writing. The applicant may then apply for appropriate building permits and licenses.

C. DENIAL: If the applicant does not meet all of the applicable requirements of the Code, the Zoning Administrator will deny the Special Use and notify the applicant in writing.

Application for Special Use I - Sports and Entertainment Vendor



Print Form

City of Tampa
Land Development Coordination
1400 North Boulevard
Tampa, FL 33607
(813) 274-1400

Date Received: _____
Received By (print) : _____
Case Number: _____
Receipt # /Amount Paid: _____
Atlas Page: _____

Zoning Section

Application/site plan is correct & complete: _____
Approved by (Zoning Staff): _____
Date of approval: _____

EXHIBIT A

Property Owner's Information:

Name(s): _____
Address: _____
City: _____
State: _____ Zip Code: _____
Phone Number: _____
email address: _____

Applicant's Information:

Name(s): _____
Address: _____
City: _____
State: _____ Zip Code: _____
Phone Number: _____
email address: _____

Parcel Information:

Location Address (List all): _____ Folio Number(s) (List all): _____
Current Use _____ Current Zoning _____

Hours/Date of the Sports and Entertainment Event:

Product(s) to be Sold: _____

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.

I, THE UNDERSIGNED OWNER AND APPLICANT, HEREBY CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS TRUE AND COMPLETE AND THAT I/WE ARE RESPONSIBLE FOR COMPLYING WITH CITY CODE, INCLUDING THE REGULATIONS IN 27-132.

Signature (owner): _____
(Print): _____

Signature (applicant): _____
(Print): _____

Sworn to and subscribed on this date:

Identification or personally known: _____
Notary Signature: _____

Sworn to and subscribed on this date:

Identification or personally known: _____
Notary Signature: _____

Commission Expiration (Stamp or date): _____

Commission Expiration (Stamp or date): _____