CITY OF STUART

Reviewed By: _____

DEVELOPMENT DEPARTMENT

PLANNED UNIT DEVELOPMENT (PUD) AMENDMENT APPLICATION

Application must be legible with all relevant fields completed.

Project ID#_____

Pre-App Conference Date: Various	Application Date: September 2020
Project Name: Central Parkway RPUD	
Parcel ID# 093841000000005304	Project Address: Unassigned, Central Parkway, Stuart, FL
Zoning/CRA Sub-district: Office-Residential Land Use and Zoned RPUD	
Subdivision: Central Parkway	Lot(s):

Fees: Major PUD Amendment - $3,148.00; Minor PUD Amendment: $2,099.00; PUD Agreement Amendment (text change only): $1,049.00 *(this does not include fees that may be charged as a result of application review by the City's consultants or any required recording fees)*

A Major Planned Unit Development Amendment is one which shall include any one of the following;

- A change of two (2) percent or more in the area of any land use designations shown on the site plan;
- Any change in the list of proposed uses;
- An increase in residential density of five (5) percent or more;
- An increase in nonresidential Building square footage of ten (10) percent or more;
- A change in the boundary of the PUD district;
- A change in the site plan or approval regarding any area(s) set aside and designated for future development;
- Any other change determined by the City Development Director to have a potentially significant impact on City services or the surrounding neighborhood;
- An amendment of greater than twelve (12) months to an originally approved timetable of development. Such an amendment may only be approved upon good cause shown to the City Commission. Any contributions conditioned as part of the original PUD agreement shall be revisited upon application for timetable extension. A timetable extension greater than twelve (12) months will require a full concurrency review.

(A Minor Planned Unit Development Amendment is any amendment that is not a Major Amendment.)

Submittal Requirements: A completed application form, the payment of fees, a site plan, one (1) copy of all documents on a PDF formatted disc electronically signed and sealed, and any other information as may be required by the City Development Director in order to do a thorough review of the request. (Note: A concept plan may, at the discretion of the applicant, be submitted instead of a site plan if a site plan has not previously been approved. However, in doing so the applicant acknowledges that a site plan will need to be submitted for City Commission approval prior to making application for a development permit.) *(The data requirements for a site plan and a concept plan are available at the Development Department)*

Approving Authority: The Development Director is required to prepare a staff report and recommendation concerning this application. For a Major PUD amendment, the Local Planning Agency (LPA) is required to hold an advertised public hearing and formulate a recommendation to the City Commission. For both types of applications, the City Commission is required to hold an advertised public hearing after which it may approve, approve with conditions, or deny the application.

Justification: Written justification supporting the application and demonstrating how the application remains: (a) consistent with the relevant components of the City of Stuart Comprehensive Plan including concurrency with adopted levels-of-service for utilities/facilities and compatibility with existing/planned uses and (b) complies with the relevant development standards of the City of Stuart Land Development Code.

(over)

General Information

(Please Print or Type)

1. Property Owner, Lessee, Contract Purchaser, or Applicant (circle one):

Name: Stephen Zagoren	City/State/Zip Code: Bridgehampton, NY 11932
Title: CDO	Telephone Number: 631-766-0023
Company: Farrell Building Company	Facsimile Number:
Company Address: PO Box 14, 2317 Montauk Highway	Email Address (optional): zags1413@gmail.com

2. Agent of Record (if any): The following individual is designated as the Agent of Record for the property owner, lessee, or contract purchaser and should receive all correspondence related to the application review.

Name: Marcela Camblor-Cutsaimanis AICP	City/State/Zip Code: Stuart, FL, 34994
Title: Principal	Telephone Number: Tel: (772) 708.1108
Company: MARCELA CAMBLOR & ASSOCIATES, INC	Facsimile Number:
Company Address: 47 W Osceola St.. #203	Email Address (optional): marcela@marcelacamblor.com

3. The Undersigned, as the Property Owner, Lessee, Contract Purchaser, or Applicant (circle one), acknowledges responsibility for all City expenses associated with the referenced application (s) including time spent by the City's consultants and further acknowledges that payment of consultant fees will be made prior to the receipt of the consultant comments.

Name: Joseph G Farrell	City/State/Zip Code: Bridgehampton, NY 11932
Title: President	Telephone Number: 631-766-0023
Company: Farrell Building Company	Facsimile Number:
Company Address: PO Box 14, 2317 Montauk Highway	Email Address (optional): zags1413@gmail.com

I hereby certify that all information contained herein is true and correct.

4. Signed this 22 day of September, 2020.

Joseph G Farrell Jr

Signature of Property Owner, Lessee, Contract Purchaser or Applicant (circle one)

As of January 01, 2020, Any and all notarial certificates prepared under Florida law must indicate whether the principal appeared by means of physical presence or by online notarization. Florida Statue 117.05

(a) For an oath or affirmation:

STATE OF ~~FLORIDA~~ New York
COUNTY OF Suffolk

Sworn to (or affirmed) and subscribed before me by means of ✓ physical presence or ___online notarization, this 22nd day of September 2021 By Joseph C Farrell Jr. (name of person making statement).

Personally Known OR Produced
Identification Type of Identification Produced

(Signature of Notary Public - State of Florida) (Print, Type, or Stamp of Notary Public)

LYNN SPRUFERA
NOTARY PUBLIC-STATE OF NEW YORK
No. 01SP6330543
Qualified in Suffolk County
My Commission Expires 09-14-2023

(b) For an acknowledgment in an individual capacity:

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me by means of ___physical presence or __online notarization,
This_____ day of _____ ( ) By _____ (name of person acknowledging).

Personally Known OR Produced
Identification Type of Identification Produced

(Signature of Notary Public - State of Florida} (Print, Type, or Stamp of Notary Public}

(c) For an acknowledgment in a representative capacity:

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me by means of __ physical presence or ___online notarization,
This _____day of_____ ( ) by_____ (name of person) as (type of authority, e.g. officer, trustee, attorney in fact} for (name of party on behalf of whom instrument was executed).

Personally Known OR Produced
Identification Type of Identification Produced

(Signature of Notary Public - State of Florida} (Print, Type, or Stamp of Notary Public