



DEPARTMENT OF DEVELOPMENT SERVICES  
CITY PLANNING DIVISION

For Internal Use Only

Case \_\_\_\_\_

Date \_\_\_\_\_

Tel. (239) 574-0553

Fax (239) 574-0591

P.O. Box 150027

Cape Coral, FL 33915-0027

**FUTURE LAND USE MAP AMENDMENT (FLUMA) APPLICATION**

**NOTE TO APPLICANT:** The completed application must be legible, and all items must be provided at the time of submission.

**FLUMA APPLICATION REQUIREMENTS**

1. ☐ **Letter of intent stating the actual request and why the request is being made**
2. ☐ **Applicant's portion of request shall be typewritten, and signature notarized:**
  - All forms (Application, Acknowledgement Form, Authorization to Represent) must be signed by the property owner or the applicant. If the Authorized Representative is an attorney, the application and the Acknowledgement Form may be signed by the attorney and an Authorization to Represent Form is not required.
  - If there are any deed restrictions on the property, a copy of the restrictions will be required.
3. ☐ **Certified survey done within past six (6) months MAY be required**
4. ☐ **If the subject property is within 500 feet of any County properties, the applicant must provide:**
  - a typewritten list of all affected property owners within the area. The list must prepare in label format and contain the following information; name, address, city, and zip-code.
5. ☐ **The applicant must provide a traffic projection of the number of trips that are anticipated to be generated by the revised Land Use including the distribution of these trips onto the roadway system. The applicant may also be required to perform a more detailed traffic impact analysis based on the City's traffic impact guidelines.**
6. ☐ **Chapter 163, Florida Statutes, requires that comprehensive plan map amendments be City Council must hold a submittal hearing (1st public hearing) prior to sending amendments to DEO. (Council may approve for submittal or deny proposed land use map amendments. Only approved amendments are submitted to DEO.) DEO then has ninety (90) days to review and respond to the proposed amendments. Upon receipt of DEO comments or objections, the local government has sixty (60) days to approve, deny, or approve with modifications the proposed land use map amendments.**
7. ☐ **Comprehensive Plan Amendments are reviewed by the Planning and Zoning Commission and City Council. Planning and Zoning Commission is an advisory body to City Council and makes recommendations on all amendments.**
8. ☐ **Please refer to the Future Land Use Map Amendment Section 3.5.2. for additional information.**

**NOTE: IF ANY OF THE ABOVE INFORMATION IS ON A SHEET LARGER THAN 11 X 17, THE APPLICANT MUST SUPPLY SEVENTEEN (17) COPIES TO BE USED FOR DISTRIBUTION. IN ADDITION TO THE APPLICATION FEE, ALL REQUIRED ADVERTISING COSTS ARE TO BE PAID BY THE APPLICANT (ORD 39-03, SECTION 3.5.2.). ADVERTISING COSTS WILL BE BILLED AND MUST BE PAID PRIOR TO HEARING.**



**DEPARTMENT OF DEVELOPMENT SERVICES  
CITY PLANNING DIVISION**

Tel. (239) 574-0553  
Fax (239) 574-0591  
P.O. Box 150027  
Cape Coral, FL 33915-0027

**FUTURE LAND USE MAP AMENDMENT APPLICATION**

**FEES:** \$1,225.00 first 3 acres plus \$220.00 each additional acre over 3 up to 20 acres; \$22.00 per acre over the first 20 acres. In addition to the application fee, all required advertising costs are to be paid by the applicant (ORD 39-03, Section 3.5.2). Advertising costs will be billed and must be paid prior to hearing.

***OWNER(S) OF PROPERTY INFORMATION***

Owner _____	Address _____
Phone _____	City _____
Email _____	State _____ Zip _____
Owner _____	Address _____
Phone _____	City _____
Email _____	State _____ Zip _____

***APPLICANT INFORMATION (If different from owner)***

Applicant _____	Address _____
Phone _____	City _____
Email _____	State _____ Zip _____

***AUTHORIZED REPRESENTATIVE INFORMATION (If Applicable)***

Representative _____	Address _____
Phone _____	City _____
Email _____	State _____ Zip _____

***PROPERTY INFORMATION***

Unit _____	Block _____	Lot (s) _____	Subdivision _____
Property Address _____			
Plat Book _____	Page _____	Current Zoning _____	
Strap Number _____	Acreage _____		
Current Land Use _____	Proposed Land Use _____		



**DEPARTMENT OF DEVELOPMENT SERVICES**  
**CITY PLANNING DIVISION**

*Tel. (239) 574-0553*  
*Fax (239) 574-0591*  
*P.O. Box 150027*  
*Cape Coral, FL 33915-0027*

THIS APPLICATION SHALL ALSO HAVE ANY ADDITIONAL REQUIRED SUPPORTING DOCUMENTS  
The owner of this property, or the applicant agrees to conform to all applicable laws of the City of Cape Coral and to all applicable Federal, State, and County laws and certifies that all information supplied is correct to the best of their knowledge.

\_\_\_\_\_  
NAME (PLEASE TYPE OR PRINT)

\_\_\_\_\_  
AUTHORIZED SIGNATURE

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribe before me, by means of \_\_\_\_\_ physical presence or \_\_\_\_\_ online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_ who is personally known to me or produced \_\_\_\_\_ as identification.

Exp Date: \_\_\_\_\_ Commission Number: \_\_\_\_\_

NOTARY STAMP HERE

Signature of notary Public: \_\_\_\_\_

Printed Name of Notary Public: \_\_\_\_\_



**DEPARTMENT OF DEVELOPMENT SERVICES**  
**CITY PLANNING DIVISION**

Tel. (239) 574-0553  
Fax (239) 574-0591  
P.O. Box 150027  
Cape Coral, FL 33915-0027

**ESTIMATED PEAK HOUR TRIP**

Parcel Size: Width\_\_\_\_\_ Depth\_\_\_\_\_ Sq. Ft.\_\_\_\_\_ Acreage \_\_\_\_\_

Soil Type: \_\_\_\_\_

Urban Services Area: (check one) Infill \_\_\_\_\_ Transition Reserve \_\_\_\_\_

Natural Resources (state habitat type, e.g. high lands, wetlands, upland forest, oak hammocks, etc.):

Animal Species: (list any endangered, threatened, or species of special concern on-site)

Estimated Development:

- Estimate total lot coverage \_\_\_\_\_ %
- Estimate total building floor area: \_\_\_\_\_ Sq. ft.
- Estimate type of future development and percentages:  
(e.g. business offices, commercial retail, automotive repair, etc.)

Estimated peak hour trip ends:

If 300 or less peak hour trip ends are projected, the applicant must provide the source of the traffic projection.  
If more than 300 peak hour trip ends are projected, a traffic impact study must be completed and submitted as part of the application (see attachments).

City Sewer: YES NO

City Water: YES NO



**DEPARTMENT OF DEVELOPMENT SERVICES**  
**CITY PLANNING DIVISION**

Tel. (239) 574-0553  
Fax (239) 574-0591  
P.O. Box 150027  
Cape Coral, FL 33915-0027

**ACKNOWLEDGEMENT FORM**

I have read and understand the above instructions. Hearing date(s) will be confirmed when I receive a copy of the Notice of Public Hearing stipulating the day and time of any applicable hearings.

I acknowledge that I, or my representative, must attend any applicable meetings scheduled for the Hearing Examiner and City Council.

I will have the opportunity at the hearing to present information pertaining to my request that may not be included in my application.

I understand any decision rendered by the CITY shall be subject to a thirty (30) day appeal period. Any work performed within the thirty (30) day time frame or during the APPEAL process will be completed at the applicant's risk.

I understand I am responsible for all fees, including advertising and recording costs. All fees are to be submitted to the City of Cape Coral with the application.

By submitting this application, I acknowledge and agree that I am authorizing the City of Cape Coral to inspect the subject property and to gain access to the subject property for inspection purposes reasonably related to this application and/or the permit for which I am applying.

I hereby acknowledge that I have read and understood the above affidavit on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
CORPORATION/COMPANY NAME

\_\_\_\_\_  
OWNER'S NAME (TYPE or PRINT)

\_\_\_\_\_  
OWNER'S SIGNATURE

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribe before me, by means of \_\_\_\_\_ physical presence or \_\_\_\_\_ online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ by \_\_\_\_\_ who is personally known to me or produced \_\_\_\_\_ as identification.

Exp Date: \_\_\_\_\_ Commission Number: \_\_\_\_\_

NOTARY STAMP HERE

Signature of notary Public: \_\_\_\_\_

Printed Name of Notary Public: \_\_\_\_\_



DEPARTMENT OF DEVELOPMENT SERVICES  
CITY PLANNING DIVISION

Tel. (239) 574-0553  
Fax (239) 574-0591  
P.O. Box 150027  
Cape Coral, FL 33915-0027

**AUTHORIZATION TO REPRESENT PROPERTY OWNER(S)**

PLEASE BE ADVISED THAT \_\_\_\_\_  
(Name of person giving presentation)

IS AUTHORIZED TO REPRESENT ME IN THE REQUEST BEFORE THE HEARING EXAMINER  
AND CITY COUNCIL.

UNIT \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT(S) \_\_\_\_\_ SUBDIVISION \_\_\_\_\_

OR LEGAL DESCRIPTION \_\_\_\_\_

LOCATED IN THE CITY OF CAPE CORAL, COUNTY OF LEE, FLORIDA.

\_\_\_\_\_  
PROPERTY OWNER (Please Print)

\_\_\_\_\_  
PROPERTY OWNER (Signature & title)

\_\_\_\_\_  
PROPERTY OWNER (Please Print)

\_\_\_\_\_  
PROPERTY OWNER (Signature & title)

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribe before me, by means of physical presence or online  
notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20 by \_\_\_\_\_ who  
is personally known to me or produced \_\_\_\_\_ as identification.

Exp Date: \_\_\_\_\_ Commission Number: \_\_\_\_\_

NOTARY STAMP HERE

Signature of notary Public: \_\_\_\_\_

Printed Name of Notary Public: \_\_\_\_\_

Note: Please list all owners. If a corporation, please supply the City Planning Division with a  
copy of corporation papers.



**FUTURE LAND USE MAP AMENDMENTS**

- A. Purpose of Amendments. Future Land Use Map amendments shall be considered for the following reasons:
1. The amendment implements the goals, objectives, and policies of the Comprehensive Plan.
  2. The amendment promotes compliance with changes to other city, state, or federal regulations.
  3. The amendment results in compatible land uses within a specific area.
  4. The amendment implements findings of reports, studies, or other documentation regarding functional requirements, contemporary planning practices, environmental requirements, or similar technical assessments.
  5. The amendment is consistent with the City's ability to provide adequate public facilities and services.
  6. The amendment prepares the City for future growth, such as reflecting changing development patterns, identifying demands for community services, reflecting changes necessary to accommodate current and planned growth in population, and facilitating community infrastructure and public services.
- B. Manner of Initiation. Applications for a Future Land Use Map Amendment (FLUMA) may be initiated in the following manner:
1. The City Council by its own motion;
  2. The Planning and Zoning Commission by its own motion;
  3. The City Manager for City initiated requests; or
  4. By a petition of one or more property owners of at least 51% of the property owners of an area proposed for amendment.
- C. Review Criteria. Proposed future land use map amendments shall be reviewed in accordance with the requirements of Chapter 163, Florida Statutes, and the following criteria:
1. Whether the proposed future land use amendment is consistent with the goals, policies, and future land use designations of the City Comprehensive Plan;
  2. The amendment protects the health, safety, and welfare of the community;
  3. The proposed amendment and all of the consistent zoning districts, and the underlying permitted uses, are compatible with the physical and environmental features of the site;
  4. The range of zoning districts and all of the allowed uses in those districts are compatible with surrounding uses in terms of land suitability or density and that a change will not result in negative impacts on the community or traffic that cannot be mitigated through application of the development standards in this Code;



**DEPARTMENT OF DEVELOPMENT SERVICES**  
**CITY PLANNING DIVISION**

*Tel. (239) 574-0553*  
*Fax (239) 574-0591*  
*P.O. Box 150027*  
*Cape Coral, FL 33915-0027*

5. The site is capable of accommodating all of the allowed uses, whether by right or otherwise, considering existing or planned infrastructure for roads, sanitary and water supply systems, stormwater, parks, etc.; and
  6. Other factors deemed appropriate by the Commission and City Council.
- D. Effective date of approval. The effective date of a future land use map amendment shall be in accordance with Chapter 163, Florida Statutes.