



DEPARTMENT OF DEVELOPMENT SERVICES  
CITY PLANNING DIVISION

For Internal Use Only

Case \_\_\_\_\_

Date \_\_\_\_\_

Tel. (239) 574-0776

Fax (239) 574-0591

P.O. Box 150027

Cape Coral, FL 33915-0027

**PUBLIC HEARING DEVIATION APPLICATION**

Please Select Proper Application Type: ☐ Landscape Deviation  
☐ Non-Residential Design Standard in the NC District  
☐ Marine Improvements

**PUBLIC HEARING DEVIATION REQUIREMENTS**

***\*Letter of Intent and Application Requirements applies to all deviation requests\****

**1. Letter of Intent including the following:**

- The sub section of the Land Development Code for which the deviation is sought, and the general intent and purpose of this section where either of the following applies:
  - Actual request.
  - Existing conditions that are not the result of the applicant and which are such that a literal enforcement of the regulations involved would result in unnecessary or undue hardship.
  - Literal conformity with the regulations would inhibit innovation or creativity in design.

**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.

***\*Please select the type of deviation you are applying for (checkmark your selection)***

**3. ☐ Landscape Deviation request must include:**

- A narrative that clearly defines the section(s) of the regulations of the requested deviation(s).
- An explanation as to the reason for the deviation and why it should be approved.
- Sample detail drawings, elevations, and perspectives that graphically demonstrate the proposed deviation and illustrate how each deviation would operate to the benefit of the public.
- Legal description and certified survey done within past six months is required.
- If the subject property is within 500 feet of any County properties, the applicant must provide a typewritten list of all affected property owners with the above area. List to include name, address, zip code, and block and lots. Computer lists are not acceptable.



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4. ☐ **Non-Residential Design Standard in the NC Zoning DIST deviation request must include:**
- Sample detail drawings
  - Schematic architectural drawings
  - Site plans
  - Floor plans
  - Elevations
  - Perspectives that graphically demonstrate how each deviation would operate to the benefit of the public interest
  - Legal description and certified survey done within past six months is required.
  - If the subject property is within 500 feet of any County properties, the applicant must provide a typewritten list of all affected property owners with the above area. List to include name, address, zip code, and block and lots. Computer lists are not acceptable.
5. ☐ **Marine Improvement deviation request must include:**
- Letter of Intent-Should address the standards in Section 5.4.11.A.2 of the Land Development Code.
  - Sample detail drawings
  - Site plan
  - Boundary survey
  - If the subject property is within 500 feet of any County properties, the applicant must provide a typewritten list of all affected property owners with the above area. List to include name, address, zip code, and block and lots. Computer lists are not acceptable

**FEE: Per City Code of Ordinances, Section 5-4(a)(1)a., a \$150.00 application fee (residential) or \$455 (non-residential) application fee is due at time of submittal. Following the approval of your request, if applicable the applicant shall be responsible for paying the City to electronically record the final signed Resolution or Ordinance with the Lee County Clerk of Court. Until this fee is paid, restrictions on the issuance of any City permits will remain on the affected property that will prevent the city from issuing any applicable building permits, site plans, certificates of use, or certificates of occupancy for any property covered by the Resolution or Ordinance.**



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**PUBLIC HEARING DEVIATION APPLICATION**

***PROPERTY INFORMATION***

Project Name: \_\_\_\_\_  
Location/Address \_\_\_\_\_  
Strap Number \_\_\_\_\_ Unit \_\_\_\_\_ Block \_\_\_\_\_ Lot (s) \_\_\_\_\_  
Plat Book \_\_\_\_\_ Page \_\_\_\_\_ Future Land Use \_\_\_\_\_ Current Zoning \_\_\_\_\_

***PROPERTY OWNER (S) 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 \_\_\_\_\_



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If the owner does not own the property in his/her personal name, the owner must sign all applicable forms in his/her corporate capacity.

**(ALL SIGNATURE MUST BE NOTARIZED)**

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.

CORPORATION/COMPANY NAME (IF APPLICABLE)

OWNER'S NAME (TYPE OR PRINT)

OWNER'S SIGNATURE

OWNER'S NAME (TYPE OR PRINT)

OWNER'S SIGNATURE

APPLICANT NAME (TYPE OR PRINT)

APPLICANT SIGNATURE

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.

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_,

20\_\_\_\_\_, by \_\_\_\_\_ who is personally known or produced

\_\_\_\_\_ as identification.

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

NOTARY STAMP HERE

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

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



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**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 \_\_\_\_\_

Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

by \_\_\_\_\_ who is personally known 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.



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**PUBLIC HEARING DEVIATION REGULATIONS**

**Section 3.4.2 Deviations.**

- A. Purpose and Intent. To grant relief from strict application of LDC requirements to allow minor deviations.
- B. Scope. Deviations may be granted for the following:
  - 1. Non-residential design standards in Article 5, Chapter 8.
  - 2. Landscaping deviations in Article 5, Chapter 5, which do not qualify for an administrative deviation.
  - 3. Design standards in the NC district.
- C. Review Criteria. A Deviation may be approved based on the following criteria:
  - 1. The proposed deviation will not result in development that is inconsistent with the intended character of the applicable zoning district.
  - 2. The normally required code standard(s) is determined to significantly inhibit development of the site.
  - 3. The deviation will not impede the ability of the project or site to adequately provide for service areas and other development features for the project.
  - 4. Access for service and emergency vehicles will not be impeded.
  - 5. The proposed deviations will result in a building and site design of equal or superior quality.
- D. Effective date of approval. A deviation shall take effect upon approval by the Hearing Examiner.

**Section 5.4.11.A.2. Marine Improvements**

- 1. The deviation will not be contrary to the public interest and will be in harmony with the general intent and purpose of this section.
- 2. The effect the proposed deviation would have on the navigability of the waterway involved.
- 3. Whether the proposed deviation would infringe upon the use of neighboring properties or any extant marine improvements in the subject waterway.
- 4. Whether there are special conditions related to the subject property or waterway which justify the proposed deviation.
- 5. Whether conditions exist that are not the result of the applicant and which are such that a literal enforcement of the regulations involved would result in unnecessary or undue hardship.



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**DOCUMENTARY EVIDENCE (LDC, Section 3.1.11F.6)**

A copy of all documentary evidence shall be made available to the decision-making body or the Hearing Examiner and to staff no later than three business days prior to the hearing of the application. This requirement includes information that the applicant intends to present at public hearing.

I have read the above requirement and agree to comply with this provision.

\_\_\_\_\_  
OWNER/APPLICANT NAME  
(TYPE OR PRINT)

\_\_\_\_\_  
OWNER/APPLICANT SIGNATURE

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

by \_\_\_\_\_ who is personally known or produced  
\_\_\_\_\_ as identification.

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

NOTARY STAMP HERE

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

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