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COMMUNITY REDEVELOPMENT AGENCY ALTERNATIVE COMPLIANCE REQUEST APPLICATION

A. GENERAL INSTRUCTIONS *(Cover sheet only, do not submit with application)

This application identifies the minimum documents and information required to request approval of alternative compliance that varies from the strict application of the requirements of Divisions 1 through 7, Article 12, Land Development Regulations, Martin County Code (LDR). The applicant is cautioned to follow the instructions carefully.

The purpose of the application is to communicate to the reviewing staff, the decision-maker, and the public what is being proposed and how the request satisfies the purpose and intent of Article 12, LDR as well as or more effectively than would adherence to the code.

Please organize and submit the application as a complete packet. The application materials shall be submitted in paper and electronic (CD or flash drive) form to:

**Martin County Growth Management Department
2401 SE Monterey Road
Stuart, FL 34996**

Sections B and C of this cover sheet shall only apply to alternative compliance requests not associated with a development review application (as delineated within Martin County LDRs Article 10) that is under review. For alternative compliance requests associated with a development review project, the applicant shall respond to the questions in Section D of this cover page within a separate document included within the development review application package.

B. FEE

Provide a check payable to the Martin County Board of County Commissioners in the amount of \$240.00.

C. APPLICATION SUBMITTAL and CHECKLIST

Provide these items with the application:

- A notarized power of attorney from the owner-applicant is required to authorize an agent to act on behalf of the owner-applicant. (If applicable)
- The Alternative Compliance Request Application must be signed and notarized.
- The site plan, landscape plan and/or architectural plan that varies from the requirements of Article 12.
- Justification statement as described below in Section D.

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D. JUSTIFICATION STATEMENT (reasons to grant request)

For each request indicate the following:

1. Identify the specific section of the Land Development Regulations for which you are seeking alternative compliance.
2. Include justification for each request responding to the following six questions:
 - i. Why strict adherence to the requirement(s) is not feasible. For example, unique circumstances on the property or site constraints (wetlands, access, property lines, native vegetation, etc.).
 - ii. How the proposed alternative provides an equal or superior means of meeting the intent and purpose of the regulation.
 - iii. How the alternative plan would help carry out specific goals or objectives in the particular CRA.
 - iv. Whether the alternative compliance request, as proposed, would create an adverse effect to nearby properties or the neighborhood. If so, describe how this will be mitigated.
 - v. Whether the request will improve or provide for better integration of the proposed development with the surrounding off-site development. For example, does the request provide consistent setback or design with the neighborhood.
 - vi. Describe any proposed mitigation efforts to offset the impacts of the request.

Staff will evaluate the alternative compliance request based on the above criteria. The Growth Management Director will consider the recommendation from staff and make the decision as to whether the request does or does not meet the requirements of the Section 12.1.12, LDR.

E. INQUIRIES AND COMMENTS

If you have any questions or comments regarding this application, please contact the Growth Management Department at (772) 288-5495. We appreciate suggestions of how to improve our services.



Martin County, Florida
Growth Management Department
DEVELOPMENT REVIEW DIVISION
2401 SE Monterey Road, Stuart, FL 34996 772-288-5495 www.martin.fl.us

ALTERNATIVE COMPLIANCE REQUEST COMMUNITY REDEVELOPMENT AREA (CRA)

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A. Applicant Information

Property owner: _____

Address: _____

City: _____, State: _____ Zip: _____

Phone: _____ Email: _____

Agent for owner (if applicable): _____

Address: _____

City: _____, State: _____ Zip: _____

Phone: _____ Email: _____

(*An Agent must submit a notarized Power of Attorney)

B. Project Information

Project Name (if other than owner): _____

Property address: _____

Parcel control number(s): _____

Project professional (if applicable): _____

Company Representative: _____

Address: _____

City: _____, State: _____ Zip: _____

Phone: _____ Email: _____

C. Applicant or agent certification:

I have read this application and the questions are answered fully and accurately.

Applicant or Agent's Signature

Date

Printed Name

**STATE OF FLORIDA
COUNTY OF MARTIN**

The foregoing instrument was sworn to, affirmed, or acknowledged before me by means of physical presence or online notarization this ____ day of _____, 20__, by _____, who is personally known to me, or produced the following type of identification _____.

NOTARY PUBLIC SEAL

Notary Public, State of Florida

(Printed, Typed or Stamped Name of Notary Public)