

PUBLIC SCHOOL IMPACT APPLICATION

The School Board of Broward County, Florida

Growth Management Section

Facility Planning and Real Estate Department

600 SE 3rd Avenue, 8th Floor, Fort Lauderdale, FL 33301; Phone: 754-321-2177, Fax: 754-321-2179

www.browardschools.com

GENERAL PROJECT INFORMATION

APPLICATION TYPE

Land Use DRI Rezoning Flex/Reserve Allocation Plat Site Plan

FOR INTERNAL USE ONLY

School Board Number

County Project Number City Project Number

Project Name

Has this project been previously submitted (since Feb. 01, 2008) ? If yes, provide the SBBC Number

Application Fee Amount Due/Paid* Is proof of Payment attached?

Check No. Online Payment Order No. (if applicable)

* Make check payable to "School Board of Broward County." No cash will be accepted.

PROJECT LOCATION AND SIZE

Folio #

Section Township Range

General location of the project Side of

at/between and

Area Acreage Jurisdiction

APPLICANT INFORMATION

Owner's Name Phone

Address City State Zip

Developer/Agent

Address City State Zip

Phone Fax Number

Agent's E-mail

DEVELOPMENT DETAILS

Land Use Designation Existing Proposed

Zoning Designation Existing Proposed

PERMITTED					PROPOSED			
Residential Type	Total Units	Built Units	Bedroom Mix	Un-built Units	Bedroom Mix	Residential Type	Number of Units	Bedroom Mix
Single Family			____ 3 BR or Less ____ 4 BR or >		____ 3 BR or Less ____ 4 BR or >	Single Family		____ 3 BR or Less ____ 4 BR or >
Townhouse/ Duplex/ Villa			____ 2 BR or Less ____ 3 BR or >		____ 2 BR or Less ____ 3 BR or >	Townhouse/ Duplex/ Villa		____ 2 BR or Less ____ 3 BR or >
Garden Apartment			____ 1 BR or Less ____ 2 BR ____ 3 BR or >		____ 1 BR or Less ____ 2 BR ____ 3 BR or >	Garden Apartment		____ 1 BR or Less ____ 2 BR ____ 3 BR or >
Mid Rise			____ 1 BR or Less ____ 2 BR or >			Mid Rise		____ 1 BR or Less ____ 2 BR or >
High Rise						High Rise		
Mobile Home			____ 2 BR or Less ____ 3 BR or >		____ 2 BR or Less ____ 3 BR or >	Mobile Home		____ 2 BR or Less ____ 3 BR or >
Total						Total		

Does this project include a non-residential development?

If yes, please describe other proposed uses

VESTED RIGHTS/EXEMPTION INFORMATION

Amount of Vested/Exempt development (including number of units, type, and bedroom mix)

Exemption Criteria (check any/all as applicable)	Vesting Criteria (check any/all as applicable)	Associated Application Number
____ Generates less than one student*	____ Located within previously approved plan amendment or rezoning with a valid mitigation agreement with the School Board through an executed and recorded DRC or Tri-Party*	
____ Age restricted to persons 18 and over*	____ Obtained site plan final approval prior to February 1, 2008*	
____ Statutory exemption* ____ Applicable Statute*	____ Site plan located within a plat for which school impacts have been satisfied*	
____ Site Plan located within a plat with a valid final SCAD letter*		Associated Plat Number: _____

*** Supporting documentation is required**

Signature of Applicant/Agent: _____ Date: _____

Please attach a survey of the project site
NOTE: 30-Day review period only commences upon a determination of completeness by School District Staff. Applicant submitting a plat application must include an official letter containing plat name and municipal project number and must indicate that the plat has been approved or accepted by the municipality
ALL APPLICANTS MUST SUBMIT THE APPLICATION TO THE 8th FLOOR