



CITY OF BOYNTON BEACH
DEVELOPMENT DEPARTMENT | PLANNING & ZONING DIVISION
100 E. Ocean Avenue • Boynton Beach, FL 33435 • (561)742-6260

GENERAL INFORMATION

Project Name (if applicable):

Project Address(es):

Request Type:

- | | | |
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| <input type="checkbox"/> Abandonment (ABAN)
<input type="checkbox"/> Admin. Adjustment (ADAJ)
<input type="checkbox"/> Admin. Appeal (ADAP)
<input type="checkbox"/> Admin. Waiver
<input type="checkbox"/> Annexation (ANEX)
<input type="checkbox"/> Cell Tower (TELE)
<input type="checkbox"/> Code Review (CDRV)
<input type="checkbox"/> Comm. Design Plan Appeal (CDPA)
<input type="checkbox"/> Comm. Development District (CDD)
<input type="checkbox"/> Comp Plan Text Amend (CPTA)
<input type="checkbox"/> Conditional Use (COUS) | <input type="checkbox"/> Conditional Use Time Ext. (CUTE)
<input type="checkbox"/> Dev of Regional Impact Annual Rpt. (DRIA)
<input type="checkbox"/> General Application (GA)
<input type="checkbox"/> Height Exception (HTEX)
<input type="checkbox"/> Land Use Plan Amend/Rezoning (LUAR)
<input type="checkbox"/> Landscape Appeal (LAAP)
<input type="checkbox"/> Lot Line Modification (LLM)
<input type="checkbox"/> Major Site Plan Mod (MSPM)
<input type="checkbox"/> Master Plan Mod (MPMD)
<input type="checkbox"/> Master Plan Time Ext (MPTE)
<input type="checkbox"/> Minor Landscape Plan Mod (MLPM)
<input type="checkbox"/> Minor Modification Site Plan (MMSP) | <input type="checkbox"/> Mobile Vending Unit (MVU)
<input type="checkbox"/> New Site Plan (NWSP)
<input type="checkbox"/> Parking Lot Variance (PKLV)
<input type="checkbox"/> Rezoning (REZN)
<input type="checkbox"/> Sidewalk Café (SWCP)
<input type="checkbox"/> Site Plan Time Ext (SPTE)
<input type="checkbox"/> Subdivision Master Plan (SBMP)
<input type="checkbox"/> Temp Signs/Banners (SIBA)
<input type="checkbox"/> Use Approval (USAP)
<input type="checkbox"/> Zoning Code Admin Appeal (ZNCA)
<input type="checkbox"/> Zoning Code Variance (ZNCV)
<input type="checkbox"/> Zoning Code Verif. Letter (ZCVL) |
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AGENT INFORMATION – complete in its entirety

Contact Name:

Company Name:

Address:

Contact Phone:

Fax:

Email:

FEES

Fee Description:

Amount: \$

Fee Description:

Amount: \$

FOR OFFICE USE ONLY

P&Z PROJECT NUMBER:

Intake by:

Payment In Full? Y N

NAVILINE PROJECT NUMBER:

Intake Date:

Check#:

Action	Date	Action	Date
Pre-App Meeting		DART Meeting	
Submittal/ Resubmittal		Legal Ad	
1 st Review Comments		P&D Board Meeting	
Public Notice/IPARC		City Commission Meeting	