

2800 NORTH HORSESHOE DRIVE NAPLES, FLORIDA 34104 (239) 252-2400 FAX: (239) 252-6358

STEWARDSHIP RECEIVING AREA AMENDMENT (SRAA) APPLICATION

LDC subsection 4.08.07 F.

PROJECT NUMBER PROJECT NAME DATE PROCESSED

To be completed by staff

SRA Administrative Minor Change LDC subsection 4.08.07 F.4.d SRA Substantial Amendment LDC subsection 4.08.07 F.4.b SRA Insubstantial Amendment LDC subsection 4.08.07 F.4.c

Original SRA AR/PL Number: _____

APPLICANT CONTACT INFORMATION

Name of Applicant(s):			
Address:	City:	State:	ZIP:
Telephone:	Cell:	Fax:	
E-Mail Address:			
Name of Agent:			
Firm:			
Address:			
Telephone:	Cell:	Fax:	
E-Mail Address:			
Name of Owner:			
Address:	City:	State:	ZIP:
Telephone:	Cell:	Fax:	
E-Mail Address:			



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PROJECT LOCATION INFORMATION

Project Name: ______

General Location and Cross Streets: _____

Section/Township/Range: ____/___ Zoning: _____

Total Area of Project: _____acres

ADJACENT ZONING/LAND USE

	Zoning	Land Use
Ν		
S		
E		
W		

LIST OF CONSULTANTS

Name:	PI	hone:	
Address:			
Name:	PI	hone:	
Address:			
Name:	PI	hone:	
Address:			
Name:	PI	hone:	
Address:			
Name:	PI	hone:	
Address:			ZIP:



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DISCLOSURE OF INTEREST INFORMATON

Please complete the following information, if space is inadequate use additional sheets and attach to the completed application packet.

a. If the property is owned fee simple by an <u>INDIVIDUAL</u>, tenancy by the entirety, tenancy in common, or joint tenancy, list all parties with an ownership interest as well as the percentage of such interest:

Name and Address	% of Ownership

b. If the property is owned by a <u>CORPORATION</u>, list the officers and stockholders and the percentage of stock owned by each:

Name and Address	% of Ownership

c. If the property is in the name of a <u>TRUSTEE</u>, list the beneficiaries of the trust with the percentage of interest:

Name and Address	% of Ownership

d. If the property is in the name of a <u>GENERAL</u> or <u>LIMITED PARTNERSHIP</u>, list the name of the general and/or limited partners:

Name and Address	% of Ownership



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e. If there is a <u>CONTRACT FOR PURCHASE</u>, with an individual or individuals, a Corporation, Trustee, or a Partnership, list the names of the contract purchasers below, including the officers, stockholders, beneficiaries, or partners:

Name and Address	% of Ownership

Date of Contract: _____

f. If any contingency clause or contract terms involve additional parties, list all individuals or officers, if a corporation, partnership, or trust:

Name and Address		

g. Date subject property acquired _____

Leased: Term of lease _____ years /months

If, Petitioner has option to buy, indicate the following:

Date of option:	

Date option terminates: _____, or

Anticipated closing date:	
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h. Should any changes of ownership or changes in contracts for purchase occur subsequent to the date of application, but prior to the date of the final public hearing, it is the responsibility of the applicant, or agent on his behalf, to submit a supplemental disclosure of interest form.



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SUBMITTAL REQUIREMENTS

The following items are to be submitted for an SRA Amendment or an Insubstantial Change, including Minor Text Changes:

- Completed Application (download current form from county website)
- Electronic documents: **<u>1 Copy</u>**

FEE REQUIREMENTS

- □ Application Fee: \$7,000.00, plus \$25.00 per acre. * SRA amendments deemed to be minor in nature, that is requiring minor strike thru and underline text amendments of no more than 10 different lines of text changes in the SRA will be capped at \$10,000.00.
- Advertising Fee for Insubstantial Amendment:
 - o \$1,125, Hearing Examiner or Collier County Planning Commission
- □ Advertising Fee for Substantial SRA Amendment:
 - \$1,125, Collier County Planning Commission; and
 - \$500, Board of County Commission

All checks payable to: Board of County Commissioners

The completed application, all required submittal materials, and fees shall be submitted to: Growth Management Department ATTN: Business Center 2800 North Horseshoe Drive Naples, FL 34104

Applicant is responsible for provided finalized copies as required for public hearing. I hereby

submit and certify the application to be complete and accurate.

Signature of Agent

Date



COLLIER COUNTY GOVERNMENT GROWTH MANAGEMENT DIVISION www.colliergov.net

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AFFIDAVIT

We/I, <u>Ave Maria Development, LLLP</u> being first duly sworn, depose and say that we/I am/are the owners of the property described herein and which is the subject matter of the proposed hearing; that all the answers to the questions in this application, including the disclosure of interest information, all sketches, data, and other supplementary matter attached to and made a part of this application, are honest and true to the best of our knowledge and belief. We/I understand that the information requested on this application must be complete and accurate and that the content of this form, whether computer generated or County printed shall not be altered. Public hearings will not be advertised until this application is deemed complete, and all required information has been submitted.

As property owner We/I further authorize <u>Q. Grady Minor & Associates, P.A. and Coleman,</u> <u>Yovanovich & Koester, P.A.</u> to act as our/my representative in any matters regarding this Petition.

Signature of Property Owner

Signature of Property Owner

Brian Goguen, Vice President of Barron Collier Corporation, General Partner

Typed or Printed Name of Owner

Typed or Printed Name of Owner

State of Florida County of Collier



(Signature of Notary Public - Śtate of Florida)

Sabina E. Hardy

(Print, Type, or Stamp Commissioned Name of Notary Public)