

**APPLICATION FOR A REQUEST TO AMEND  
THE COLLIER COUNTY GROWTH MANAGEMENT PLAN**

APPLICATION NUMBER PL20180003659 DATE RECEIVED \_\_\_\_\_

PRE-APPLICATION CONFERENCE DATE January 15, 2019

DATE SUFFICIENT \_\_\_\_\_

This application, with all required supplemental data and information, must be completed and accompanied by the appropriate fee, and returned to the Comprehensive Planning Department, Suite 400, 2800 North Horseshoe Drive, Naples, Florida 34104. 239-252-2400 (Fax 239-252-2946).

The application must be reviewed by staff for sufficiency within 30 calendar days following the filing deadline before it will be processed and advertised for public hearing. The applicant will be notified in writing, of the sufficiency determination. If insufficient, the applicant will have 30 days to remedy the deficiencies. For additional information on the processing of the application, see Resolution 97-431 as amended by Resolution 98-18 (both attached). If you have any questions, please contact the Comprehensive Planning Section at 239-252-2400.

**SUBMISSION REQUIREMENTS**

**I. GENERAL INFORMATION**

A. Name of Applicant Mark S. Jenkins-Senior Vice President

Company KRG COURTHOUSE SHADOWS LLC

Address 30 S. Meridian St., Suite 1100

City Indianapolis State IN Zip Code 46204

Phone Number 317-578-5165 Fax Number \_\_\_\_\_

B. Name of Agent \* D. Wayne Arnold, AICP

- THIS WILL BE THE PERSON CONTACTED FOR ALL BUSINESS RELATED TO THE PETITION.

Company Q. Grady Minor and Associates, P.A.

Address 3800 Via Del Rey

City Bonita Springs State Florida Zip Code 34134

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

B1. Name of Agent \* Richard D. Yovanovich

- THIS WILL BE THE PERSON CONTACTED FOR ALL BUSINESS RELATED TO THE PETITION.

Company Coleman, Yovanovich and Koester, P.A.

Address 4001 Tamiami Trail North, Suite 300

City Naples State Florida Zip Code 34103

Phone Number 239-435-3535 Fax Number \_\_\_\_\_

C. Name of Owner (s) of Record KRG Courthouse Shadows LLC

Address 30 S. Meridian St., Suite 1100

City Indianapolis State IN Zip Code 46204

Phone Number 317-577-5600 Fax Number \_\_\_\_\_

D. Name, Address and Qualifications of additional planners, architects, engineers, environmental consultants and other professionals providing information contained in this application. **Please see Exhibit I-D**

**II. Disclosure of Interest Information:**

A. If the property is owned fee simple by an **INDIVIDUAL**, 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. (Use additional sheets if necessary).

Name and Address	Percentage of Ownership
<u>Not Applicable</u>	_____
_____	_____
_____	_____
_____	_____
_____	_____

B. If the property is owned by a **CORPORATION**, list the officers and stockholders and the percentage of stock owned by each.

Name and Address	Percentage of Stock
<u>Not Applicable</u>	_____
_____	_____
_____	_____
_____	_____
_____	_____

C. If the property is in the name of a **TRUSTEE**, list the beneficiaries of the trust with the percentage of interest.

Name and Address	Percentage of Interest
<u>Not Applicable</u>	_____
_____	_____
_____	_____
_____	_____
_____	_____

D. If the property is in the name of a **GENERAL** or **LIMITED PARTNERSHIP**, list the name of the general and/or limited partners.

Name and Address	Percentage of Ownership
<u>KRG Courthouse Shadows LLC</u>	<u>100%</u>
<u>KRG Courthouse Shadows I LLC</u>	_____
<u>30 S. Meridian St, Suite 100</u>	_____
<u>Indianapolis, IN 46204</u>	_____
<b><u>Please see Exhibit II</u></b>	_____
_____	_____

- E. If there is a **CONTRACT FOR PURCHASE**, 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	Percentage of Ownership
<u>Johnson Development Associates, Inc.</u>	<u>100%</u>
<b><u>Please see Exhibit II</u></b>	
_____	_____
_____	_____
_____	_____
_____	_____

Date of Contract: 08/27/2018

- 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
<u>Not Applicable</u>
_____
_____
_____

- G. Date subject property acquired [ 2006] leased ( ): \_\_\_\_\_ Term of lease \_\_\_\_\_ yrs./mos.

If, Petitioner has option to buy, indicate date of option: \_\_\_\_\_ and date option terminates: \_\_\_\_\_, or anticipated closing: \_\_\_\_\_.

- 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.

**III. DESCRIPTION OF PROPERTY:**

A. LEGAL DESCRIPTION Please see Exhibit III.A  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

B. GENERAL LOCATION 3420 and 3290 TAMIAMI TRL E,  
Southeast quadrant of Airport Road and Tamiami Trail E. (U.S. 41)

C. PLANNING COMMUNITY East Naples D. TAZ 289

E. SIZE IN ACRES 20.35± acres F. ZONING Courthouse Shadows CPUD

G. SURROUNDING LAND USE PATTERN Developed residential and commercial

H. FUTURE LAND USE MAP DESIGNATION(S) Urban Designation, Commercial District, Mixed Use Activity Center Subdistrict, #16 US 41 and Airport-Pulling Road

**IV. TYPE OF REQUEST:**

A. GROWTH MANAGEMENT PLAN ELEMENT (S) TO BE AMENDED:

- |   |  |
|---|--|
| <input type="checkbox"/> Housing Element                    | <input type="checkbox"/> Recreation/Open Space     |
| <input type="checkbox"/> Traffic Circulation Sub-Element    | <input type="checkbox"/> Mass Transit Sub-Element  |
| <input type="checkbox"/> Aviation Sub-Element               | <input type="checkbox"/> Potable Water Sub-Element |
| <input type="checkbox"/> Sanitary Sewer Sub-Element         | <input type="checkbox"/> NGWAR Sub-Element         |
| <input type="checkbox"/> Solid Waste Sub-Element            | <input type="checkbox"/> Drainage Sub-Element      |
| <input type="checkbox"/> Capital Improvement Element        | <input type="checkbox"/> CCME Element              |
| <input checked="" type="checkbox"/> Future Land Use Element | <input type="checkbox"/> Golden Gate Master Plan   |
| <input type="checkbox"/> Immokalee Master Plan              |  |

B. AMEND PAGE (S) 57 and 143 OF THE Future Land Use ELEMENT AS FOLLOWS: (Use ~~Strike through~~ to identify language to be deleted; Use Underline to identify language to be added). Attach additional pages if necessary:

Please see Exhibit IV.B

C. AMEND FUTURE LAND USE MAP(S) DESIGNATION FROM Not applicable TO Not applicable

D. AMEND OTHER MAP(S) AND EXHIBITS AS FOLLOWS: (Name & Page #)  
Activity Center #16

E. DESCRIBE ADDITINAL CHANGES REQUESTED: Not applicable

**V. REQUIRED INFORMATION:**

NOTE: ALL AERIALS MUST BE AT A SCALE OF NO SMALLER THAN 1"=400'. At least one copy reduced to 8-1/2 x 11 shall be provided of all aerials and/or maps.

A. **LAND USE**

Exhibit V.A Provide general location map showing surrounding developments (PUD, DRI's, existing zoning) with subject property outlined.

Exhibit V.A Provide most recent aerial of site showing subject boundaries, source, and date.

Exhibit V.A Provide a map and summary table of existing land use and zoning within a radius of 300 feet from boundaries of subject property.

B. **FUTURE LAND USE AND DESIGNATION**

Exhibit VB Provide map of existing Future Land Use Designation(s) of subject property and adjacent lands, with acreage totals for each land use designation on the subject property.

**C. ENVIRONMENTAL**

N.A. Provide most recent aerial and summary table of acreage of native habitats and soils occurring on site. HABITAT IDENTIFICATION MUST BE CONSISTENT WITH THE FDOT-FLORIDA LAND USE, COVER AND FORMS CLASSIFICATION SYSTEM (FLUCCS CODE). NOTE: THIS MAY BE INDICATED ON SAME AERIAL AS THE LAND USE AERIAL IN "A" ABOVE.

N.A. Provide a summary table of Federal (US Fish & Wildlife Service) and State (Florida Game & Freshwater Fish Commission) listed plant and animal species known to occur on the site and/or known to inhabit biological communities similar to the site (e.g. panther or black bear range, avian rookery, bird migratory route, etc.). Identify historic and/or archaeological sites on the subject property.

**D. GROWTH MANAGEMENT**

**Reference 9J-11.006, F.A.C. and Collier County's Capital Improvements Element Policy 1.1.2 (Copies attached).**

1. INSERT "Y" FOR YES OR "N" FOR NO IN RESPONSE TO THE FOLLOWING:

N Is the proposed amendment located in an Area of Critical State Concern? (Reference 9J-11.006(1)(a)(5), F.A.C.). If so, identify area located in ACSC.

N Is the proposed amendment directly related to a proposed Development of Regional Impact pursuant to Chapter 380 F.S. ? (Reference 9J-11.006(1)(a)7.a, F.A.C.)

N/N Is the proposed amendment directly related to a proposed Small Scale Development Activity pursuant to Subsection 163.3187 (1)(c), F.S. ? (Reference 9J-11.006(1)(a)7.b, F.A.C.) Does the proposed amendment create a significant impact in population which is defined as a potential increase in County-wide population by more than 5% of population projections? (Reference Capital Improvement Element Policy 1.1.2). If yes, indicate mitigation measures being proposed in conjunction with the proposed amendment.

Y, \*\* Does the proposed land use cause an increase in density and/or intensity to the uses permitted in a specific land use designation and district identified (commercial, industrial, etc.) or is the proposed land use a new land use designation or district? (Reference Rule 9J-5.006(5) F.A.C.). If so, provide data and analysis to support the suitability of land for the proposed use, and of environmentally sensitive land, ground water and natural resources. (Reference Rule 9J-11.007, F.A.C.)

\*\* Please see Market Study prepared by Michael J. Timmerman

**E. PUBLIC FACILITIES**

1. Provide the existing Level of Service Standard (LOS) and document the impact the proposed change will have on the following public facilities:

Exhibit V.E. Potable Water

Exhibit V.E. Sanitary Sewer

\*\*\* Arterial & Collector Roads; Name specific road and LOS

Pine Ridge Road

Goodlette-Frank Road

\*\*\* Please see Traffic Impact Analysis prepared by

Exhibit V.E. Drainage

Exhibit V.E. Solid Waste

Exhibit V.E. Parks: Community and Regional

If the proposed amendment involves an increase in residential density, or an increase in intensity for commercial and/or industrial development that would cause the LOS for public facilities to fall below the adopted LOS, indicate mitigation measures being proposed in conjunction with the proposed amendment.

(Reference Capital Improvement Element Objective 1 and Policies)

2. Exhibit V.E. Provide a map showing the location of existing services and public facilities that will serve the subject property (i.e. water, sewer, fire protection, police protection, schools and emergency medical services.
3. N.A. Document proposed services and public facilities, identify provider, and describe the effect the proposed change will have on schools, fire protection and emergency medical services.

#### **F. OTHER**

Identify the following areas relating to the subject property:

- Zone X Flood zone based on Flood Insurance Rate Map data (FIRM).
- N.A. Location of wellfields and cones of influence, if applicable. (Identified on Collier County Zoning Maps)
- N.A. Traffic Congestion Boundary, if applicable
- N.A. Coastal Management Boundary, if applicable
- N.A. High Noise Contours (65 LDN or higher) surrounding the Naples Airport, if applicable (identified on Collier County Zoning Maps).

#### **G. SUPPLEMENTAL INFORMATION**

- N.A. \$16,700.00 non-refundable filing fee made payable to the Board of County Commissioners due at time of submittal. (Plus proportionate share of advertising costs)
- Provided \$9,000.00 non-refundable filing fee for a Small Scale Amendment made payable to the Board of County Commissioners due at time of submittal. (Plus proportionate share of advertising costs)
- Provided Proof of ownership (copy of deed)
- Provided Notarized Letter of Authorization if Agent is not the Owner (See attached form)
- Submitted Electronically 1 Original and 5 complete, signed applications with all attachments including maps, at time of submittal. After sufficiency is completed, 25 copies of the complete application will be required.

\* Maps shall include: North arrow, name and location of principal roadways and shall be at a scale of 1"=400' or at a scale as determined during the pre-application meeting.