



REQUEST FOR SUBMITTAL REQUIREMENT WAIVER IN THE VILLAGE OF ESTERO

Upon written request, the Community Development Director may modify the submittal requirements for Public Hearings, Development Orders, Limited Review Development Orders and other Administrative Action Applications where it can be clearly demonstrated that the submission will have no bearing on the review and processing of the application. The request and the Director's written response must accompany the application submitted and will become a part of the permanent file.

APPLICATION FOR WAIVER OF REQUIRED SUBMITTAL ITEMS (indicate the appropriate application type)

- ☐ Public Hearing - General Requirements **(34-202)**
- ☐ Public Hearing - Additional Requirements for:
 - ☐ Development of Regional Impact **(34-203(a))**
 - ☐ Planned Developments **(34-203(b))**
 - ☐ Planned Development Amendment **(34-203(b))**
 - ☐ Rezoning Other than Planned Developments **(34-203(c))**
 - ☐ Special Exceptions **(34-203(e))**
 - ☐ Variances **(34-203(f))**
 - ☐ Limited Amendment to Existing Mine Zoning Approval **[12-121(j)]**
 - ☐ Compact Community Planned Development **(32-502)**
 - ☐ Private Recreational Facilities Planned Development **(34-941(g))**
- ☐ Development Order - Submittal Requirements **(10-152)**
 - ☐ Application Form and Contents **(10-153)**
 - ☐ Additional Required Submittals **(10-154)**
- ☐ Limited Review Development Order – Submittal Requirements **(10-152)**
 - ☐ Required Submittals **(10-175)**
- ☐ Administrative Action Application Requirements **[34-204(a)]**

State the Type of Administrative Application: _____

PLEASE PRINT OR TYPE:

STRAP Number: _____
 Name of Project: _____

Name of Agent: _____
 Street Address: _____
 City, State, Zip: _____
 Phone Number: _____ Email Address: _____

Name of Applicant*: _____
 Street Address: _____
 City, State, Zip: _____
 Phone Number: _____ Email Address: _____

***If applicant is not the owner, a letter of authorization from the owner must be submitted.**

THE VILLAGE OF ESTERO DEPARTMENT OF COMMUNITY DEVELOPMENT
9401 Corkscrew Palms Circle • Estero, FL 33928
PHONE (239) 221-5036

A. SPECIFIC SECTION(S) AND REQUIREMENT(S) FOR WHICH A WAIVER IS SOUGHT:

Section Number	Requirement
#1	
#2	
#3	
#4	
#5	
#6	
#7	
#8	
#9	

B. SCOPE OF PROJECT AND REASON(S) FOR REQUEST:

Please provide an explanation of the scope of the project and the reason(s) why you think the request for submittal waiver(s) should be approved. Use additional sheets if necessary and attach to this application form. (Please print or type)

Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.

Signature of Applicant

Date

.....
FOR STAFF USE ONLY
.....

DIRECTOR'S DECISION:

- ☐ Request Denied
☐ Request Approved
☐ Request Approved Per Attached Comments

Director Signature

Date