DEVELOPMENT REVIEW PROCESS

Planning and Zoning Commission Only

You will need to apply 3 weeks prior to the Technical Staff Review (TSR) you want to be placed on and TSR meets the second and fourth Thursday of each month at 9:00 a.m. These meetings for the foreseeable future will be done via Zoom. You will receive a TSR Agenda prior to the meeting and within that agenda will be the login instructions. After the Application has been deemed Certified which means all the documents are correct and accurate you will be scheduled for the Planning and Zoning Commission Meeting within 45 days. The Planning and Zoning Commission meets the fourth Tuesday of every month at 7:00 p.m. and these meetings are in person at the Village Council Chambers.

Should you wish to make a presentation at a meet via Power Point you need to send the Power Point presentation to the Village's Information Systems Department by 2:00 p.m. before the meeting. The email address to send the presentation is as follows: informationsystems@royalpalmbeachfl.gov.



AAR SUBMITTAL CHECKLIST

App	olication Name:
	Electronic copy to include all documents
	Development Application
	Applicable Fees (application and legal review deposit)
	Last Recorded Warranty Deed
	Applicable Consent Forms
	Justification / Statement of Use
	Survey
	Color Samples – actual material/color samples for all changes; include Brand & Color Number
	Most recently approved Site Plan depicting the proposed sign locations and information as required on Signage Attachment 1
	Elevation Drawings (for building architectural approval)
	Landscape Plan (for landscape plan approval)
	Photos of building
	Registered Trademark documents
*	In order to optimize the software used to process the application please use Internet Explorer Browser.
Not	tes / Other items:

VILLAGE OF ROYAL PALM BEACH PLANNING and ZONING 1050 Royal Palm Beach Boulevard Royal Palm Beach, FL 33411 (561) 790-5131

DEVELOPMENT APPLICATION			
APPLICATION NO.:	SUBMITTAL DATE:		
PROPERTY OWNER(S)	APPLICANT		
Name:	Name:		
Address:	Address:		
E-Mail:	E-Mail:		
Phone:	Phone:		

Proof of ownership, along with designation of agent if Application is being submitted by anyone other than the Owner(s), must be submitted with Application.

CHECK APPLICABLE APPROVALS BEING REQUESTED:

(Fees per current Village Code must be submitted with application.)

			_		_
	ADMINISTRATIVE APPEAL ¹	\$250.00		SITE PLAN MODIFICATION (Major) 1	\$2,000.00
	Plus 1 hr Legal Review Fee = \$225.00			Plus 5 hr Legal Review Fee = \$1,125.00	
	ANNEXATION	No Fee		SITE PLAN MODIFICATION (Minor)	\$500.00
	MASTER PLAN REVIEW ^{1 3}	\$2,000.00		SITE PLAN REVIEW 12	\$2,000.00
	Plus 5 hr Legal Review Fee = \$1,125.00			Plus 5 hr Legal Review Fee = \$1,125.00	
	COMP PLAN AMENDMENT (LARGE) ¹ Plus 7 hr Legal Review Fee = \$1,575.00	\$3,000.00		SITE PLAN EXTENSION	\$250.00
	COMP PLAN AMENDMENT (SMALL) 1	\$2,000.00		MOD. TO COUNCIL REQUIREMENTS	\$250.00
L	Plus 5 hr Legal Review Fee = \$1,125.00			¹ Plus 2 hr Legal Review Fee = \$450.00	
	ZONING TEXT AMENDMENT ¹	\$1,000.00	$ \; \Box \; $	LANDSCAPE WAIVER/VARIATION	\$100.00
	Plus 3 hr Legal Review Fee = \$675.00			¹ Plus 2 hr Legal Review Fee = \$450.00	
	PRELIMINARY PLAT ¹	\$1,000.00		ZONING CODE VARIANCE (Commercial)	\$500.00
	Plus 5 hr Legal Review Fee = \$1,125.00			¹ Plus 2 hr Legal Review Fee = \$450.00	
	FINAL PLAT (cost recovery due at resubmittals)	\$1,500.00		ZONING CODE VARIANCE (Single Family) ¹	\$100.00
	Plus 3 hr Legal Review Fee = \$675.00	1 -,		Plus 2 hr Legal Review Fee = \$450.00	
П	REZONING ¹	\$2,000.00	П	SUBDIVISION VARIANCE 1	\$100.00
	Plus 5 hr Legal Review Fee = \$1,125.00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Plus 2 hr Legal Review Fee = \$450.00	
П	SPECIAL EXCEPTION 1	\$1,000.00	П	SIGN VARIANCE 1	\$500.00
	Plus 3 hr Legal Review Fee = \$675.00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_	Plus 2 hr Legal Review Fee = \$450.00	, , , , , , ,
	ARCHITECTURAL REVIEW (AAR) 1	\$250.00		PARKING VARIANCE ¹	\$500.00
	Plus 2 hr Legal Review Fee = \$450.00			Plus 2 hr Legal Review Fee = \$450.00	
	AAR APPEAL ¹	\$250.00		Application Fees and Legal Review Fees	50%
	Plus 1 hr Legal Review Fee = \$225.00			(Upon 3 rd Submittal)	of initial fees
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Legal Review Feet of \$225.00 per hour, minimum hours set per fee schedule adopted by Resolution No. 16-38 Adopted on December 19, 2024

² Site Plan Review is subject to an additional \$300.00 per acre fee.

³ Master Plan Review is subject to an additional \$100.00 per acre fee.

^{*} Additional Legal Advertisement and Mailing Fees may also apply.

^{*} All fees incurred will be billed to applicant and must be paid prior to final certification.

GENERAL DATA
Project Name:
Project Location: Parcel Control No.:
Street Address:
Existing Land Use:
Proposed Land Use:
Existing Future Land Use Designation:
Proposed Future Land Use Designation:
Existing Zoning District:
Proposed Zoning District:
Total Site Area: Sq. Ft.: Acres
Is site currently served by public water? YesNo Is site currently served by public sewer? YesNo
RESIDENTIAL
Total Number of Dwelling Units: Density (Units per acre):
COMMERCIAL
Total Square Footage:Number of Buildings:
Describe briefly the nature of any improvements presently located on the subject property.
Describe type of operation or business proposed; or the proposed construction.
Estimate of construction costs.
Describe in detail the phasing of the proposed development (Attach if insufficient space).

Has any previous Application been filed within the last year in connection with the subject property? (Yes) \[\bigcup (No) \]. If yes, briefly describe the nature of the Application. Has a site plan been previously approved by the Village Commission for this property? (Yes) \[\bigcup (No) \]. If yes, please note previous approval.			
Give the name, address and telephone number for the following	persons or firms involved in this development:		
AGENT [if different from Owner(s)]:	DEVELOPER:		
Name:	Name:		
Company Name:	Company Name:		
Address:	Address:		
E-Mail:	E-Mail:		
Phone:	Phone:		
PLANNER:	ARCHITECT:		
Name:	Name:		
Company Name:	Company Name:		
Address:	Address:		
E-Mail:	E-Mail:		
Phone:	Phone:		
	Florida Registration No.:		

ENGINEER:	LANDSCAPE ARCHITECT:
Name:	Name:
Company Name:	Company Name:
Address:	Address:
E-Mail:	E-Mail:
Phone:	Phone:
Florida Registration No.:	Florida Registration No.:
SURVEYOR:	ATTORNEY:
Name:	Name:
Company Name:	Company Name:
Address:	Address:
E-Mail:	E-Mail:
Phone:	Phone:
CURRENT OCCUPANT:	ALL CORRESPONDENCE WILL BE MAILED TO APPLICANT ONLY UNLESS A SUBSTITUTE ADDRESS IS SPECIFIED BELOW:
Name:	
Address:	Address:
E-Mail:	E-Mail:
Phone:	Phone:

Consent Form INSTRUCTIONS: Consent to an agent is required from the property owner(s) and contract purchaser, if applicable, if the property owner(s) or contract purchaser does not intend to attend all meetings and public hearings and submit in person all material pertaining to the application. A separate form is required from each owner/contract purchaser. Consent to a firm shall be deemed consent for the entire firm, unless otherwise specified. Consent is valid for one year from date of notary, unless otherwise specified; therefore, this application will be considered cancelled if there is no activity within one year from date of notary. Attach copy of last recorded warranty deed for subject property.			
This form shall serve as CONSENT for the agent identified bel documents for the following application(s) affecting property I			
☐ Architectural Review ☐ Comprehensive Plan Amendment ☐ Minor Site Plan Modification ☐ Modifications to Council ☐ Rezoning ☐ Site Plan Review ☐ Special Exception Use ☐ Voluntary Annexations ☐ Zoning Text Amendments	Imposed Conditions Preliminary Plats		
Other (indicate request):			
I hereby give CONSENT to (ents, and to attend and represent me at all meetings and		

I hereby certify I have full knowledge the property I have an ownership interest in is the subject of this application. I further certify the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge. I understand this application, related material and all attachments become official records of the Planning & Zoning Department of the Village of Royal Palm Beach, Florida, and will not be returned. I understand that any false, inaccurate or incomplete information provided by me or my agent will result in the denial, revocation or administrative withdrawal of this application, request, approval or permits. I acknowledge that additional information may be required to process this application. I further consent to the Village of Royal Palm Beach to publish, copy or reproduce any copyrighted document submitted as a part of this application for any third party. I further agree to all terms and conditions, which may be imposed as part of the approval of this application.

designated above to agree to all terms and conditions which may arise as part of the approval of this application for

the proposed use of:

OWNER/CONTRACT PURCHASER INFOR	RMATION: I am the [] owner [] contract purchaser (check one)
(Name - type, stamp or print clearly)	(Signature)
Corporation/Entity	
(Address) (City, State, Zip)	
STATE OF FLORIDA PALM BEACH COUNTY:	
The foregoing instrument was acknowledged before acknowledging) He/sho as identification and did/did not take an oath (circ	ore me this day of, 20by (name of persone is personally known to me or has produced (type of identification) tele correct response).
(Name - type, stamp or print clearly)	(Signature)
	NOTARY'S SEAL
AGENT INFORMATION:	
(Name - type, stamp or print clearly)	(Name of firm)
(Address) (City, State, Zip)	Signature of Agent
STATE OF FLORIDA PALM BEACH COUNTY:	
The foregoing instrument was acknowledged before acknowledging) . He/sho as identification and did/did not take an oath (circular content of the content of	ore me this day of, 20by (name of person e is personally known to me or has produced (type of identification) the correct response).
(Name - type, stamp or print clearly)	(Signature)
	NOTARY'S SEAL

APPLICANT'S CERTIFICATION

(I) (We) affirm and certify that (I) (We) understand and will comply with all provisions and regulations of the Village of Royal Palm Beach, Florida. (I) (We) understand that if this Petition is approved by the Village, the aforementioned real property described herein will be considered, in every respect, to be a part of the Village of Royal Palm Beach and will be subjected to all applicable laws, regulations, taxes and police powers of the Village including the Comprehensive and Zoning Ordinance. (I) (We) further certify that all statements and diagrams submitted herewith are true and accurate to the best of (my) (our) knowledge and belief. Further, (I) (We) understand that this Application and attachments become part of the Official Records of the Village of Royal Palm Beach, Florida, and are not returnable.

Witness	Signature of Applicant
Witness	Printed Name of Applicant
Applicant is:	Address:
☐ Appointee ☐ Lessee	Telephone Number:
Agent Contract Purchaser	

ARCHITECTURAL AND AES	STHETIC RE	VIEW CRITERIA-ROYAL PALM BEACH			
Application Date:		Applying for Meeting on process. Please complete form and return to the Planning D			
This is a required phase of the Village Site Plan Rev with the appropriate attachments.	view process.				
			Check appropriate bo	X	
IGNAGE REVIEW					
RCHITECTURE REVIEW					
ANDSCAPE REVIEW					
Business Name:					
Location Address:					
NAME		ADDRESS		PHONE	
Building Owner					
Property Owner					
Applicant					
Contact Person					
Description of proposed building and improvements	(Justification	Statement may	be used if additional	space is needed)	
		() () ()	Part of a Complex New Existing		
Signed:	(□\ P.	epresentative	(□) Owner		