



**CITY OF CLERMONT  
SITE REVIEW  
Filing Instructions**

**SITE REVIEW APPLICATION & INSTRUCTIONS**

The attached Site Plan review application must be completely filled out, addressing every item even if it requires a “not applicable” (NA) response. The third page of the application form includes a list of supporting documentation that must be included with the first improvement submittal package.

**If any of these items are not included in the submittal package, the entire package will be rejected and a site review will not be scheduled.**

The procedure and deadline for a “Formal” Site review is as follows:

- 1) Cover sheet indicating documents and quantity
- 2) Six (6) sets of plans (individually fold or rolled)
- 3) Required supporting documents (3 sets)
- 4) Site Review Fee
- 5) Deadline for submittal is Tuesday at 5:00 P.M. to be scheduled on the following third Wednesday.

Fees and submittal may not be submitted separately. If you have any questions concerning the submittal fee, please call the *Planning & Zoning Dept.* at 352-241-7301. Once the review has been completed, staff will provide written comments and indicate if the next review will be formal or informal. This will be faxed or emailed to you with the original being mailed.

**Subsequent informal reviews do not require a meeting. The plans will be disbursed and comments will be forwarded to the Development Review Coordinator usually within a week to ten days.**

***\*\* Please DO NOT copy these instructions as part of your application \*\****

<p><b>City of Clermont</b> Development Services Department 685 W. Montrose St. P.O. Box 120219 Clermont, FL. 34712-0219 (352) 394-4083 Fax: (352) 394-3542</p>
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02/02/2015



**CITY OF CLERMONT  
SITE REVIEW APPLICATION  
COMMERCIAL PROJECT**

DATE: \_\_\_\_\_

FEE: \_\_\_\_\_

**PROJECT NAME** (if applicable): \_\_\_\_\_

Property location: \_\_\_\_\_ City \_\_\_\_\_ County (in JPA)

**Owner's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

**Developer's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

**Engineering Firm:** \_\_\_\_\_

Engineer's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

**General location of property** \_\_\_\_\_

**City of Clermont**  
Development Services Department  
685 W. Montrose St.  
P.O. Box 120219  
Clermont, FL. 34712-0219  
(352) 394-4083 Fax: (352) 394-3542

## DEVELOPMENT DATA

**The following information is required for all projects:**

Existing Zoning \_\_\_\_\_

Future Land Use \_\_\_\_\_

Acreage or Square Footage of Total Property \_\_\_\_\_

Number of Phases \_\_\_\_\_

Acreage of each Phase \_\_\_\_\_

**The following information is required for Commercial Projects only:**

Building Square Footage \_\_\_\_\_

Number of Parking Spaces \_\_\_\_\_

Number of Handicap Parking Spaces \_\_\_\_\_

Total Square Footage of Parking Area \_\_\_\_\_

Total Impervious Area (break down) \_\_\_\_\_

**The following information is required for Subdivisions only:**

Number of Lots \_\_\_\_\_

Required Setbacks \_\_\_\_\_

**CITY OF CLERMONT  
SITE REVIEW DOCUMENT SUBMITTAL SHEET**

**THESE PAGES MUST ACCOMPANY EACH SUBMITTAL INDICATING THE MATERIALS AND DOCUMENTS ENCLOSED. Completed by City staff.**

Review Plans should be signed and sealed on the cover page only.  
The final set of plans should be signed and sealed on every page.

<u>Document Being Submitted</u>	<u>Date Submitted</u>
1. Storm Water Calculations	_____
2. Storm Water Spread Calculations	_____
3. Water System Analysis	_____
4. Geo-technical Report	_____
5. Certified Boundary Survey	_____
6. Architectural Elevation	_____
7. Tree Survey	_____
8. Landscape	_____
9. Irrigation Plans	_____
10. S.J.R.W.M.D. Permit	_____
11. DEP Water Applications	_____
12. DEP Sewer	_____
13. Florida D.O.T. Permit	_____
14. Certified As Builts	_____
15. Engineers cost estimate for Performance Bond	_____
16. Lighting plan	_____
17. Water and Sewer Calculations	_____

**Indicate the Review Number and Date received for each site review:**

Rev. #1 \_\_\_\_\_ Rev. #2 \_\_\_\_\_ Rev. #3 \_\_\_\_\_  
Rev. #4 \_\_\_\_\_ Rev. #5 \_\_\_\_\_ Rev. #6 \_\_\_\_\_

**Additional Notes And Comments:** \_\_\_\_\_  
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