



CITY OF BELLEVIEW

City with Small Town Charm
www.bellevuefl.org

Development Services

5525 SE 119th St.
Bellevue, FL 34420
Office: 352-245-7021
Fax: 352-307-7708

SITE PLAN WAIVER REQUEST

Waiver requests **will not** be processed without the required attachments and fees. Please refer to City Code of Ordinances Section 127.5(e) for detailed information about site plan waivers.

Parcel Number(s): _____
Permit Number: _____

Project / Subdivision Information:

Owner(s) Name: _____
Project/Subdivision Name: _____
Unit/Block/Lot: _____ / _____ / _____ Section/Twp/Range: _____ / _____ / _____
Commercial Subdivision Individual Residence Farm Golf Course

Point of Contact Information:

Firm: _____ Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____ FAX Number: _____
Cell Number: _____ E-mail: _____

Waiver Information:

Section & Title of Code/Ordinance: _____
Justification for waiver request: _____

(Attach additional waivers on a separate sheet, if needed)

FOR STAFF USE ONLY:

AR #: _____
Date of SPRC Consideration _____ Approved: Yes No
Date of CC Consideration _____ Approved: Yes No

ZONING USE:

Parcel of record: Yes No Eligible to apply for Family Division Yes No
Zoned: _____ ESOZ: _____ Must Vacate Plat: _____ Verified by: _____