

**APPLICATION FORM  
COMPREHENSIVE PLAN TEXT AMENDMENT (CPTA)  
INDIAN RIVER COUNTY**



**Planning Division accepts Comprehensive Plan Text Amendment applications only during the months of January, April, July and October of each year (except that Capital Improvements Element Amendments may be initiated by the County anytime during the year in accordance with Florida Statutes, Section 163.3177(3)(b)). Each application must be complete when submitted and must include all required attachments. An incomplete application will not be processed and will be returned to the applicant.**

*Future Land Use Element, Coastal Management Element, Sanitary Sewer Sub-Element*

Assigned Project Number: CPTA - 2017100049-80376

	Current Owner/Applicant	Agent
Name:	Indian River County Board of County Commissioners	Community Development Department Staff
Complete Mailing Address:	1801 27 <sup>th</sup> Street, Vero Beach, FL 32960-3365	Same
Phone # (including area code)	(772) 226 – 1243	Same
Fax # (including area code)	(772) 978 – 1806	Same
E-Mail:		
Contact Person:		Bill Schutt

**Signature of Owner or Agent:** \_\_\_\_\_

Please attach the following items to this application. Do not ignore any of the following items. Indicate "N/A" if an item is not applicable.

1. What is the proposed amendment's citation in the Comprehensive Plan? Include the element or sub-element, page number, and if applicable, the objective and policy number(s).

*Revise several elements of the County's Comprehensive Plan.*

2. What is the exact language proposed to be added and/or deleted from the plan?

*Various changes.*

3. What is the purpose of the request?

*Minor text updates.*

4. What is the justification for the request?

*Change in conditions.*

5. Provide an analysis of the proposed amendment's consistency with all applicable goals, objectives, and policies of the comprehensive plan. *NA*

6. Provide an analysis of the proposed amendment's impact on public facilities and services. *NA*

7. Provide an analysis of the proposed amendment's environmental impacts. *NA*

8. Provide a check, money order or cash in the amount of \$NA, made payable to Indian River County.

**THE APPLICANT MUST ATTEND A PRE-APPLICATION CONFERENCE WITH LONG-RANGE PLANNING SECTION STAFF PRIOR TO APPLYING.**