

**TOWN OF LADY LAKE GROWTH MANAGEMENT DEPARTMENT
LOT AGGREGATION APPLICATION**

Owner's Information

Owner's Name: _____

Mailing Address: _____

Telephone Number: _____ Email Address: _____

Applicant's Information

Applicant's Name: _____

Mailing Address: _____

Telephone Number: _____ Email Address: _____

Applicant is: Owner Agent Purchaser Lessee Other

Property Information

Property Address/Location: _____

Alternate Keys: _____

Legal Description of Lots/Parcels to be aggregated:

Area of each existing lot/parcel: _____ Square Footage _____ Acreage

_____ Square Footage _____ Acreage

_____ Square Footage _____ Acreage

Area of Newly Created Lot/Parcel _____ Square Footage _____ Acreage

Utilities: Central Water Central Sewer Well Septic Tank

Zoning of the property:

Number, square footage and present use of the existing structures on the property:

Proposed use of the property:

Zoning of the property:

Have any land use applications been file within the last year in connection with this property?
____ Yes ____ No. If yes, briefly describe the nature of the request:

Applications shall include a legal description of the properties, proof of ownership and authorization from the owner if represented by an agent or contract purchaser. A new survey and deed must be included for all the aggregated lot/parcels.

I certify that the statements in this application are true to the best of my knowledge.

Signature of Applicant

PLEASE SUBMIT THE APPLICATION, ACCOMPANIED BY THE APPROPRIATE REVIEW FEES AND SIX COPIES OF ALL APPLICABLE INFORMATION DOCUMENTATION and AS REQUIRED BY THE LADY LAKE LAND DEVELOPMENT REGULATION, ADOPTED AUGUST 15, 1994 TO THE GROWTH MANAGEMENT DEPARTMENT. ADDITIONAL COPIES OF APPLICATION AND PLANS WILL BE REQUIRED PRIOR TO CONSIDERATION AT THE PLANNING AND ZONING BOARD AND TOWN COMMISSION MEETINGS.

Office Use:

Date Application Received: _____ Received by: _____

Fees Paid: _____