

**TOWN OF LADY LAKE GROWTH MANAGEMENT DEPARTMENT**  
**MAJOR/MINOR SITE PLAN MODIFICATION APPLICATION**

Type of Site Plan Modification Requested: \_\_\_\_\_ Minor \_\_\_\_\_ Major

**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**

Project Name: \_\_\_\_\_

Property Address/Location: \_\_\_\_\_

Alternate Key: \_\_\_\_\_

Full Legal Description:  
\_\_\_\_\_

Current Zoning of Property: \_\_\_\_\_

Area of the Property: \_\_\_\_\_ Square Feet \_\_\_\_\_ Acres

Utilities: \_\_\_\_\_ Central Water \_\_\_\_\_ Central Sewer \_\_\_\_\_ Well \_\_\_\_\_ Septic Tank

Requested Town Zoning of Property:  
\_\_\_\_\_

Describe the Proposed Modification (If for storage, what time of material will be stored?):  
\_\_\_\_\_  
\_\_\_\_\_

Have any development reviews and/or approvals been granted to this property?

\_\_\_ Yes \_\_\_ No. If yes, briefly describe the nature of the request:

---

This application must be accompanied by proof of ownership and authorization form the owner if represent by an agent or contract purchaser.

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

---

Signature of Applicant

PLEASE SUBMIT APPLICATION TO THE GROWTH MANAGEMENT DEPARTMENT ACCOMPANIED BY TEN COPIES OF THE SITE PLAN, THREE 11 X 17 (SIGNED AND SEALED REQUIRED) AND ONE DIGITAL COPY, APPROPRIATE REVIEW FEES, PROOF OF OWNERSHIP AND ALL APPLICABLE INFORMATION AND DOCUMENTATION AS REQUIRED BY LADY LAKE ORDINANCE 94-08, LAND DEVELOPMENT RGULATIONS, ADOPTED AUGUST 15, 1994.

---

**Office Use:**

Date Application Received: \_\_\_\_\_ Received by: \_\_\_\_\_

Fees Paid:

Minor Site Plan Modification: \_\_\_\_\_

Minor Site Plan Modification: \_\_\_\_\_