

Instructions: Submit one copy of completed application, location map, and applicable fee for <u>each</u> project with a residential component requiring a review by the School Board **to each affected Local Government**.

The School Board requires this information for student generation to be calculated, school capacity to be evaluated, and potential mitigation addressed. For information regarding this application process, please contact the Planning and Project Management Department of the School Board of Brevard County at (321) 633-1000, ext. 11418.

Local Government to determine the type of Application:

		I. Project Information	
Project Name:		County / Municipa	ality:
Parcel ID / Tax Account	<u>t #.</u> (attach separa	te sheet for multiple parcels):	
Location / Address of si	ubject property: _		(Attach location map)
Acreage:	Type of Red	quest at Local Government	
	II.	. Ownership / Agent Informa	ation
Owner/Contract Purcha	ıser Name(s):		
Agent / Contact Person	:		
Mailing Address:			
Telephone:		Email:	
(Please note that a cop	y of the determina	tion letter will be sent to the Owner/	Agent if an email address is provided above.
I hereby certify the sta herewith are true and			lication with any attachments submitted
Owner or Agent Sig	nature	 Dat	te
and included with this a	pplication at time	`	4 of this application form) must be completed a company/corporation, please submit

October 2023
Facilities Services

This _____ day of ____

Notary Public

Commission Expires:

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Date / Time Stamp: _____

(Form of Identification)



III. Development Information

Current Land Use Designation		Proposed Land Use Designation		
Current Zoning		Proposed Zoning		
Project Acreage				
Total Dwelling Units Proposed				
Dwelling Unit Breakdown (Qty)	Single Family or Town Homes:	Multi-Family or Apartments:	Condo:	Mobile Home / Manufactured:

Year of Project or Phase Completion: Total Dwelling Units by Type / Year

Year End 20XX					
Unit Type	Year 1	Year 2	Year 3	Year 4	Year 5+
Single Family / Town Homes					
Multi-Family / Apartments					
Condominium					
Mobile Home / Manufactured					
Totals by Year					

NOTE: This application will not be deemed complete until all required information has been submitted to the School Board of Brevard County. Submittal requirements include a completed application, phasing information, review fee(s), agent authorization (if applicable) and location map. Please be advised that additional documentation/information may be requested during the review process.

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Data / Time Stamp	
Date / Time Stamp:	



Local Government Agency

This section is to be completed by the Local Government and submitted to the School Board of Brevard County. The Local Government is responsible for verifying the number of units currently vested under the existing Comprehensive Plan and Zoning or a previously issued School Concurrency Availability Determination Letter.

Local Govern	ment Case #:_			
Please check [√]	type of application	request (check only one; a	as defined by Interlocal Ag	greement):
☐ School Capacity Determination (Preliminary Development Requests) ☐ Exemption Review				
Capacity Determination Conversion to Concurrency Determination				☐ Time Extension (2 Years)
☐ Concurrency	Determination (Fin	al Development Requests)		
Preliminary D	evelopment Re	equests (examples: R	Rezoning and Comp	Plan Amendments):
Number of	Units by Type	Maximum Permitted by Proposal	Currently Permitted (Vested)	Difference
Single Family	y / Town Homes			
Multi-Fam	nily / Apartments			
	Condominium			
Mobile Home	/ Manufactured			
	Totals:			
<u>rinai Develop</u>		s requesting a Concu ber of Units by Type	Proposed	<u>)11</u> .
		e Family / Town Homes		
	Multi-Family / Apartmer			
		Condominium		
Mobile H		e Home / Manufactured		
Local Governr	ment Reviewer (<mark>p</mark>	lease print name/Title)	Email	address
Local Governr	nent Reviewer's	Signature _	Date	
	d Local Governme	ents:		
		SCHOOL BOARD U	JSE ONLY	
October 2023 Facilities Services	October 2023			
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AUTHORIZATION TO ACT AS AGENT

I,	authorize			
(Owner)	(Agent)			
to act as applicant, representing me in Public Hearings before				
	(Local Government)			
pertaining to Preliminary and Final Develop	oment Requests, and other matters pertaining to			
School Concurrency.				
	Owner Signature			
	Cimer eignature			
State of Florida, County of Brevard				
Sworn and subscribed to before me				
This day of				
·	(Form of Identification)			
	_			
Notary Public				
My Commission Expires:				

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Date / Time Stamp:

CONCURRENCY FEE SCHEDULE

CONCURRENCY FEE SCHEDULE					
Review / Negotiation	Туре	Cost			
School Capacity Determination	Preliminary Development Request (CDL)	\$200			
Capacity Determination Conversion to Concurrency Determination	Previously Reviewed in the same School Board Reporting Year	\$200			
Concurrency Determination	Final Development Request (SCADL)	\$400			
Exemption Letter	See Section 13.1(d)2. of the Interlocal Agreement	\$100			
Time Extensions	All	\$100			
Proportionate Share Mitigation Agreement	All	\$3000			
Appeals	All	\$1000			
Capacity Enhancement Agreement	All	\$3000			

F.S. 163.31777, 163.3180, 1001.41, 1001.42

Revisions:

August 28, 2014

October 22, 2018

Approved October 16, 2023 without changes