

PLANNING & PERMITTING  
817 Ohio Avenue, Lynn Haven, FL 32444  
develop\_plan@cityoflynnhaven.com  
850-248-0506

**MINOR SUBDIVISION APPLICATION**

Staff use only:

Date Received: \_\_\_/\_\_\_/\_\_\_

Time Received: \_\_\_\_\_ (a.m./p.m.)

Date: \_\_\_\_\_

Application No: \_\_\_\_\_

Owner/Applicant: \_\_\_\_\_

Agent/Applicant: \_\_\_\_\_

**(If the applicant is other than the property owner, a letter of authorization is required from the owner)**

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home No: \_\_\_\_\_ Cell No: \_\_\_\_\_

Work No: \_\_\_\_\_ Email: \_\_\_\_\_

Property Description: Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

Parcel ID No: \_\_\_\_\_

Property Address/Physical

Location: \_\_\_\_\_

\_\_\_\_\_

Legal

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_. (If more lines are needed, please write "See attached" and attach legal description to application)

Subdivision: \_\_\_\_\_ Lot #(s): \_\_\_\_\_ Block: \_\_\_\_\_

Parcel size: \_\_\_\_\_

Dimensions of the current parcels: \_\_\_\_\_

From what street is property currently accessed? \_\_\_\_\_

From what street will any newly created parcel(s) be accessed? \_\_\_\_\_

Located in CRA? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Future Land Use Designation: \_\_\_\_\_

What is the current use of the parcel? \_\_\_\_\_

Describe all structures currently located on, or, any unique features of parcel: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Located in 1911 Plat? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If the parcel's land use is LDR and it is located in the 1911 Historic Plat Overlay, please answer the following questions:

Does the newly proposed parcel(s) each have 75 feet of road frontage? Yes \_\_\_\_ No \_\_\_\_

Does the newly proposed parcel(s) each have a minimum of 7,500 sq. ft. lot area?

Yes \_\_\_\_ No \_\_\_\_

Please describe your reasons for requesting a minor subdivision. \_\_\_\_\_

\_\_\_\_\_

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HEREBY SWEAR THAT THE INFORMATION CONTAINED HEREIN AND THE ATTACHMENTS HERETO ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF BAY

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared \_\_\_\_\_, who is personally known to me, or, has provided \_\_\_\_\_ as identification, and, who did not take an oath.

WITNESS my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

**Required Attachments:**

Water and Sewer availability form verification from Public Works.

Deed to property with complete legal description

Map clearly showing the proposed division of the property, lot dimensions, and the location of the existing and proposed ingress and egress area of the property.

Authorization (if applicable)

Application fee.....\$100.00

**MINOR SUBDIVISION GUIDELINES**

**Requirements for Minor Subdivisions:**

A. **Minor subdivisions** shall include splitting land into 2 parcels, platting a previously unrecorded lot, or adjustments made to existing lot lines/re-plats.

B. Such **minor subdivisions** are exempt from the requirement to submit a preliminary plat & improvement plans. Applications for a **minor subdivision** shall only require a final plat for the purpose of recording the lot or lots as configured.

C. A **minor subdivision** shall result in a lot or lots that comply with the density, dimensions, & other design requirements of this ULDC.

D. Where a lot line adjustment occurs, it shall not create a nonconforming situation with regard to a lot or any structures located on a lot.

E. **Minor subdivisions** shall not be approved for the same property granted a minor subdivision within the prior twelve (12) months.

F. **Minor subdivisions** shall not be approved for the same owner's property within 200 feet of property granted a minor subdivision within the prior twelve (12) months.

G. **In order to qualify** for exemption through the lot reconfiguration and lot line adjustment provision, the following information shall be provided:

- An application for approval of the lot reconfiguration, lot line adjustment, and exemption from the platting requirements, **along with owner authorization, if applicant is not the owner.**
  - A boundary survey showing the parcel(s) or lot(s) to be divided and/or lot line(s) to be adjusted and the lot(s) or parcel(s) to be altered shall be prepared by a Florida Registered Professional Surveyor and Mapper and shall include the following information:
    - Existing legal descriptions, boundary survey, dimensions of the lot(s) and/or parcel(s) to be altered, and dimensions of the lot(s) and/or parcel(s) to be enlarged or altered. All existing easements and rights-of-way must be indicated.
    - For the new lot(s) and/or parcel(s), legal descriptions and proposed dimensions of the lot and/or parcel.
    - The boundary survey shall indicate that its purpose is for a Lot Reconfiguration or Lot Line Adjustment.
    - The boundary survey shall be drawn at a scale not smaller than one inch equals 100 feet, and no letter or number shall be less than one-tenth of an inch in height and shall be bold enough to remain clearly legible after
      - reduction.
    - The following language must be typed legibly on the survey:

***MINOR SUBDIVISION APPROVAL***

***THIS IS TO CERTIFY THAT THIS MINOR SUBDIVISION HAS BEEN EXAMINED BY THE CITY OF LYNN HAVEN, BAY COUNTY, FLORIDA AND THAT IT IS HEREBY APPROVED FOR RECORD.***

***SIGNED ON THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_.***

***BY: \_\_\_\_\_***  
***JESSE NELSON, MAYOR***

H. The Water Sewer Availability form must be submitted to Public Works for verification. Once Public works verifies the water and sewer availability, then submit the verification form from Public Utilities along with this application.

I. The \$100 application fee must be received along with the application. All personal checks, cashier's checks, or money orders are to be made payable to the City of Lynn Haven.

J. The survey must be recorded with the Bay County Clerk of Circuit Court within 30 days of the approval date.

K. The City must receive two (2) recorded copies of the survey within 30 days of the approval date.

**For office use only:**

**Lot and block number(s) of current parcel:** \_\_\_\_\_

**How is parcel listed in 1975 tax roll?** \_\_\_\_\_