



MINOR	City of Titusville Minor Division Submittal Application
Project Name: _____	_____
Project Location: _____	_____
Submitted By: _____	_____
Company Name: _____	Email: _____

Minor Division Review Requirements

Yes	No	NA		Note Reason for "No" or "NA" Check
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8 Copies of the Proposed Minor Division Certified by a Professional Land Surveyor	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plan Size 24" x 36" (Folded to 9" X 12")	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Minor Division Review Fee (Call 383-5793 for Fee Amount)	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proof of Ownership or Owners Authorization	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any Covenants, Deed Restrictions or any other required documents	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Summary of Proposed Development (residential, commercial, etc.)	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name of Owner/Developer (address, phone, email)	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name of Engineer, Surveyor, Architect, Landscape Architect, Planner (address, phone numbers, email address).	_____
Site Data Requirements, to be included on the proposed minor division:				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A vicinity map showing the location of the minor division in relationship to abutting properties and right-of-way.	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The lot lines, dimensions and acreage for lot being created, the total tract and all lots.	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A metes and bound description of the total tract and all lots being created.	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Zoning and setback information	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	North arrow and scale.	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The minor subdivision book and page where the minor division is to be filed.	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A signed and dated certificate of ownership stating: "I hereby certify that I am the owner of the property described herein, which property is within the subdivision regulation jurisdiction of the City of Titusville, and that I freely adopt this plan of division."	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A note on the plans stating "THIS IS NOT A RECORDED PLAT."	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A statement to be signed by the Clerk of Circuit Court of Brevard County, stating: 'Received and filed as an unrecorded map in accordance with F.S. Chapter 177.132.'	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A municipal approval statement to be signed by the (1) Planning and Growth Management Director and (2) City Engineer certifying that the minor division complies with applicable ordinances and regulations of the City.	_____

Upon approval of the minor subdivision, an original mylar drawing of the minor division survey and any covenants, deed restrictions or other required documents shall be submitted to the City for final approval, and then filed with the Clerk of the Circuit Court as an unrecorded map, in accordance with F.S. 177.132. It shall be filed by the subdivider with all fees paid by the subdivider. Upon filing of the approved minor subdivision, six (6) paper copies of the filed minor subdivisions shall be submitted to the City for its records.

City of Titusville Official Use Only			
Application Received Date: _____	Fee: _____		
HTE Project #: _____	Log Number: _____		
Checked-In By: _____	Site Classification: <input type="checkbox"/> Type I <input type="checkbox"/> Type II		
Note deficiencies in application: _____	Application Status: <input type="checkbox"/> Complete <input type="checkbox"/> Not Complete		
Date of Rejection: _____	Rejected By: _____		