

City of Bartow
School Concurrency Application
 [For New Residential Development Only]

Date Received: _____

INSTRUCTIONS: Submit a completed application for each project requiring a determination of school capacity.

The following information is to be provided to the City of Bartow Planning Department along with all other required applications for complete review of the proposed residential development. This information will be forwarded to the Polk County School Board (PCSB) in order for student generation rates to be calculated, school capacity evaluated, and potential mitigation addressed. For additional information please contact the Planning Department at 863-534-0100.

Please check (√) type of application request (one only):

- [] Non-Binding Concurrency Determination [] Time Extension [] Exempt/Vested Confirmation
 [] Binding Concurrency Determination [] Other

COL Fees: Not Applicable; applicable Polk County School Board fees shall be made payable to the School Board.

I. Project Information: *(Attach an 8½ x 11 vicinity map, with primary access point(s) identified and adjacent streets clearly labeled)*

Project Name: _____
 Parcel ID#: (attach separate sheet for multiple parcels): _____ - _____ - _____
 Location/Address of subject property: _____

II. Ownership/Agent Information:

Applicant Name(s)*: _____
 Agent/Contact Person: _____
 Mailing address: _____
 Telephone#: _____ Fax: _____ Email Address: _____

I hereby certify the statements and/or information contained in this application with any attachments submitted herewith are true and correct to the best of my knowledge.

Owner or Agent Signature _____ Date _____

**If applicant is not the property owner, a letter of authorization from the property owner(s) must be included with this form at time of submittal.*

III. Development Information

Project Data				
Current Land Use Designation		Proposed Land Use Designation		
Current Zoning		Proposed Zoning		
Project Acreage				
Total Units				
Unit Breakdown:	Single Family:	Multi-Family:	Mobile Home:	
Is this a phased project: [] Yes [] No <i>(If yes please specify type and number of units per year)</i>				
Phase	Proposed SF Units	Proposed MF/MH Units	Beginning Date	Expected Completion Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
SF = Single Family MF = Multi-Family MH = Mobile Home				
Project Located in City Core Improvement Area? [] Yes [] No				
Calculation of School Impact Fees: _____ <i>(Exempt in Core Improvement Area)</i>				
Verified by City of Bartow Staff: _____				
Signature and Title			Date	

THIS SECTION TO BE COMPLETED USING OFFICIAL PCSB DATA

Date and Time Received: _____ Case#: _____ Taken in by: _____

CSA: Elementary _____ Middle _____ High _____

Current capacities: Elem: _____ Middle _____ High _____

Adjacent CSA: E _____ _____ _____

Adjacent CSA: E _____ _____ _____

Adjacent CSA: M _____ _____ _____

Adjacent CSA: M _____ _____ _____

Adjacent CSA: H _____ _____ _____

Adjacent CSA: H _____ _____ _____

**Boxes checked indicate schools in which capacity will be reserved.*

SCHOOL CAPACITY INFORMATION (to be completed by PCSB)

New students generated by proposed development: _____

School	Current & Projected (FY 3 yr hence) Enrollments	Permanent Capacity	Funded Capacity Expansion*	Committed Capacity	Students Generated by Project	Capacity Available
Elementary						
Middle						
High						

* The funded capacity expansion must be within the first 3 years of the 5-Year Work Program.

Sufficient Capacity to Meet Concurrency Demand: [] Yes [] No

Public School Facilities: Describe any past or proposed Public School Facility dedicated, constructed, or funded in order to mitigate the public school impacts of this development.

School Concurrency Mitigation Option(s): If there is not Available School Capacity to accommodate the development, describe any applicable proposed School Concurrency Mitigation options to be considered.

Other Relevant Information: Provide other relevant information that is needed to evaluate the School Concurrency Application and to make a finding with regard to Available School Capacity.

Note: This application will not be deemed complete until all applicable submittal requirements have been submitted to the School District. Submittal requirements include completed application and location map.

FOR OFFICIAL CITY OF BARTOW USE ONLY

Date of School Board Response: _____ Received by: _____

Date of Concurrency Determination: _____ Certificate No: _____