



Submittal Checklist

This form must be completed, submitted, and approved by a Planner prior to dropping off any physical sets of plans.

CONTACT INFORMATION

CONTACT NAME:	PHONE:	EMAIL:
---------------	--------	--------

PROJECT INFORMATION

PROJECT NAME:	DATE SUBMITTED:
ADDRESS/LOCATION:	FOLIO NUMBER:
PROJECT PLANNER ASSIGNED:	

ZONING INFORMATION

The information listed below may be obtained through the Property Appraiser Office: <https://www.miamidade.gov/pa/> or the City North Miami Beach Website: <https://www.citynmb.com/290/Planning-Zoning>

ZONING DISTRICT:	LAND USE DESIGNATION:	CURRENT USE OF LAND:
------------------	-----------------------	----------------------

APPLICATION TYPE

Select the applications being submitted:

<input type="checkbox"/> Abandonment, Vacation of ROWs, Easements <input type="checkbox"/> Annexation <input type="checkbox"/> Comprehensive Plan Amendment <input type="checkbox"/> Conditional Use <input type="checkbox"/> Special Limited Conditional Use <input type="checkbox"/> Development of Regional Impact <input type="checkbox"/> Miscellaneous Application (separate application) <input type="checkbox"/> Rezoning or Land Use Plan Amendment	<input type="checkbox"/> New Site Plan Application* <input type="checkbox"/> Resubmittal Site Plan Application (# _____) <input type="checkbox"/> Variance <input type="checkbox"/> Administrative Waiver <input type="checkbox"/> T-Plat Application <input type="checkbox"/> Final Plat Application <input type="checkbox"/> Text Amendment <input type="checkbox"/> Other: _____
---	--

Submittal Checklist

The applicant and a planner shall review these items digitally prior to submittal to confirm sufficiency. If any of these items are missing, application will not be accepted.

<input type="checkbox"/> Application <input type="checkbox"/> Application Fees (w. calculations) <input type="checkbox"/> Response Narrative <input type="checkbox"/> Traffic Methodology / Study <input type="checkbox"/> Design Narrative <input type="checkbox"/> Concurrency Service Demand Form <input type="checkbox"/> Lobbyist Registration <input type="checkbox"/> Letter of Intent <input type="checkbox"/> (3) Sets of Mailing Labels <input type="checkbox"/> Other: _____	<input type="checkbox"/> Architectural Plans (Complete set) <input type="checkbox"/> Landscape Plans (Complete set) <input type="checkbox"/> Engineering Plans (Complete set) <input type="checkbox"/> Photometric Plans (Complete set) <input type="checkbox"/> Plat <input type="checkbox"/> Survey <input type="checkbox"/> TRAD Comment response narrative <input type="checkbox"/> (7) Physical sets of all documents indicated <input type="checkbox"/> (1) Electronic Thumb drive or CD of all documents indicated
--	---



STAFF USE ONLY (DO NOT FILL IN BELOW)

RECEIVED BY:

DATE:

SCHEDULED DROP OFF DATE AND TIME:

STAFF CHECKLIST

- | | |
|--|---|
| <input type="checkbox"/> Electronic link sent for review prior to submission | <input type="checkbox"/> No missing documents or pages |
| <input type="checkbox"/> Fees calculated and received check | <input type="checkbox"/> All items received as indicated on the checklist |
| <input type="checkbox"/> Mailing Labels received | <input type="checkbox"/> Items submitted by TRAD or Final TRAD deadline |