

**PINELLAS COUNTY BROWNFIELDS REDEVELOPMENT PROGRAM  
INDIVIDUAL APPLICATION FOR BROWNFIELDS DESIGNATION**

Complete this form to request designation by Pinellas County as a Brownfields area. It is important to complete all applicable sections and attach all necessary information. It is required that a Brownfields Preapplication Meeting be held before submitting this application. If you have any questions concerning completion of this application or wish to schedule a Preapplication Meeting, please call (727) 464-7332 and ask to speak to the Brownfields Coordinator. This application is to be completed by a person who owns or controls a potential brownfields site and is requesting designation and has agreed to rehabilitate and redevelop the brownfields site or area in accordance with the Florida Brownfields Redevelopment Sections 376.77-376.84, Florida Statutes.

**\*Please submit an original and thirteen copies of the application and supporting documentation.**

**PROPERTY INFORMATION**

Property or Area Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Property Size (acres/square feet) \_\_\_\_\_ Parcel Number(s) \_\_\_\_\_

**Attach property location map and legal description of property.**

**PROPERTY DESCRIPTION**

Briefly describe property (vacant land, unoccupied, incorporated, etc.):

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

Zoning \_\_\_\_\_

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

Is property located within one or more of the following? (Check all that apply)

\_\_\_\_ EPA Brownfields Assessment Pilot/Grant Area

\_\_\_\_ Community Redevelopment Area

\_\_\_\_ Enterprise Zone

\_\_\_\_ Empowerment Zone

Located within one-half mile of an existing major street?      \_\_\_ Yes      \_\_\_ No  
Public street access?      \_\_\_ Yes      \_\_\_ No  
Existing public water and sewer distribution lines?      \_\_\_ Yes      \_\_\_ No  
Outside floodplain area?      \_\_\_ Yes      \_\_\_ No      (If No)      \_\_\_ 100 Yr.      \_\_\_ 25 Yr.

Describe all outstanding property taxes due on the property

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**APPLICANT INFORMATION**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Interest in Property:

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**CURRENT PROPERTY OWNER(S) (if different from applicant)**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Legal Status of the Current Property Owner(s):

\_\_\_\_\_ Individual/Sole Proprietorship      \_\_\_\_\_ General Partnership      \_\_\_\_\_ State

\_\_\_\_\_ Limited Liability Company      \_\_\_\_\_ Limited Partnership      \_\_\_\_\_ State

\_\_\_\_\_ Florida Corporation

\_\_\_\_\_ Out-of-State Corporation      State of Incorporation \_\_\_\_\_

**If the owner is not the applicant a letter or Affidavit of Authorization is required.**

**ENVIRONMENTAL STATUS**

Brief description of the nature and geographical extent of contamination by hazardous substances and/or pollutants, if known:

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Brief description of any previous or current remedial action:

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If remediation is needed, will you agree to enter into a Brownfields Site Rehabilitation Agreement with the Florida Department of Environmental Protection (or authorized designee)? \_\_\_\_\_Yes \_\_\_\_\_No

***Attach Phase I or Phase II Environmental Reports, if available.***

**DESIGNATION CRITERIA**

The following information addresses Brownfields Designation Criteria as outlined in s 378.80 F.S. required for projects where an individual who owns or controls a potential Brownfields site is requesting the designation and has agreed to rehabilitate the brownfields site.

**DEVELOPMENT PLAN/ECONOMIC PRODUCTIVITY**

Provide a general description of the proposed redevelopment plans for the site also describes how the rehabilitation and redevelopment of the proposed Brownfields site or area will result in economic productivity of the area. Attach additional sheets as necessary to complete your response. ***Be sure to attach further illustrative or graphic information, as appropriate.***

*Applicant is reminded that the proposed site development is subject to final approval by County Administrator and must be in compliance with all applicable Local Government and County Codes and regulations in effect at the time of permitting.*

**JOB CREATION**

How many new permanent full-time or part-time jobs will the project create, which are not associated with the assessment and remediation of the project site? (Please note that section s.376.80 (20(b)(2) F.S. requires a minimum of ten (10) new jobs be created?) \_\_\_\_\_

Does the applicant have an agreement with the County, which contains the terms for the redevelopment of the Brownfield site or brownfield area (provide copy if available)? \_\_\_\_\_

## CONSISTENCY WITH THE COMPREHENSIVE PLAN

Is the proposed redevelopment of the proposed Brownfields site consistent with the local comprehensive plan? \_\_\_\_\_

***Please provide a letter from the Pinellas Planning Council stating that the proposed Brownfields area is consistent with the Pinellas Countywide Plan.***

## ZONING

Is the proposed project a permissible use under the local land development regulations? \_\_\_\_\_

***Please provide a zoning verification letter from the local government Zoning Department stating that the proposed project is a permissible use.***

## FINANCIAL RESOURCES

Reasonable assurances must be provided by the applicant that sufficient financial resources are available to the applicant to implement and complete a rehabilitation agreement and redevelopment plan. ***Attach a statement, as well as any other appropriate information, outlining the financial resources available to the applicant for rehabilitation and redevelopment.*** This statement can include financial resources the applicant anticipates to obtain (private loans, equity and assistance) through designation as a Brownfields area. In short, describe your general financial plan for your project.

## Documentation of Public Notice

Has the required public notice been given to nearby neighbors and residents of the proposed Brownfields area in accordance the Florida Brownfields Redevelopment Act? \_\_\_\_\_ ***A copy of the newspaper advertisement and a photo of the posted notification(s) shall be provided by applicant.***

## PUBLIC HEARING DOCUMENTATION

If the proposed Brownfields area is located outside of a community redevelopment area, enterprise zones, empowerment zones, closed military bases, or designated Brownfields pilot area, attach the results of at least one public hearing (advertised and held in accordance with the Brownfields Redevelopment Act) in the area to be designated to provide an opportunity for public input on the size of the area, the objectives for rehabilitation, job opportunities and economic developments anticipated, neighborhood residents considerations, and other relevant local concerns must be provided prior to the approval of the application. Public Hearing documentation may be provided after application is submitted but will be required prior to application approval by the BOCC.

Date of Public Hearing \_\_\_\_\_

Location of Public Hearing \_\_\_\_\_

**SERVICES TO BE PROVIDED**

Have you had a Brownfields Preapplication Meeting? \_\_\_ Yes \_\_\_ No (It is required that applicants have a Preapplication Meeting. Please call (727) 464-7332 for more information.

In order to better assist you, please check the type of designation you are requesting and the type of assistance/incentives you are seeking through this designation (check all that apply):

Type of Designation: \_\_\_\_\_ Several parcels \_\_\_\_\_ Single parcel

Type of Assistance/Incentives:

\_\_\_\_\_ Regulatory Assistance (aid for meeting government agency permitting requirements)

\_\_\_\_\_ Technical Assistance (aid in obtaining grants, loans, etc.)

\_\_\_\_\_ Grants (gap financing for Brownfields remediation)

\_\_\_\_\_ Loans (remediation loan funds)

\_\_\_\_\_ Tax Credits/Exemptions due to Brownfield Area Designation

\_\_\_\_\_ Job Creation Credits due to Brownfield Area Designation

\_\_\_\_\_ Job Training Grants due to Brownfield Area Designation

\_\_\_\_\_ Other: \_\_\_\_\_

Please describe in greater detail the services you would like to receive as a participant in the Brownfields program (optional):

\_\_\_\_\_

What are your goals with respect to the property (i.e., sale, redevelopment, business expansion, etc.)?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The contents of this application shall be considered public records of the County. The undersigned affirms that the information contained in this application is true and accurate.

**Applicant:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print/Type Name

**For Office Use Only**

Application Received by: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant Contacted on: \_\_\_\_\_

Date Information Received to Complete Application (if applicable): \_\_\_\_\_

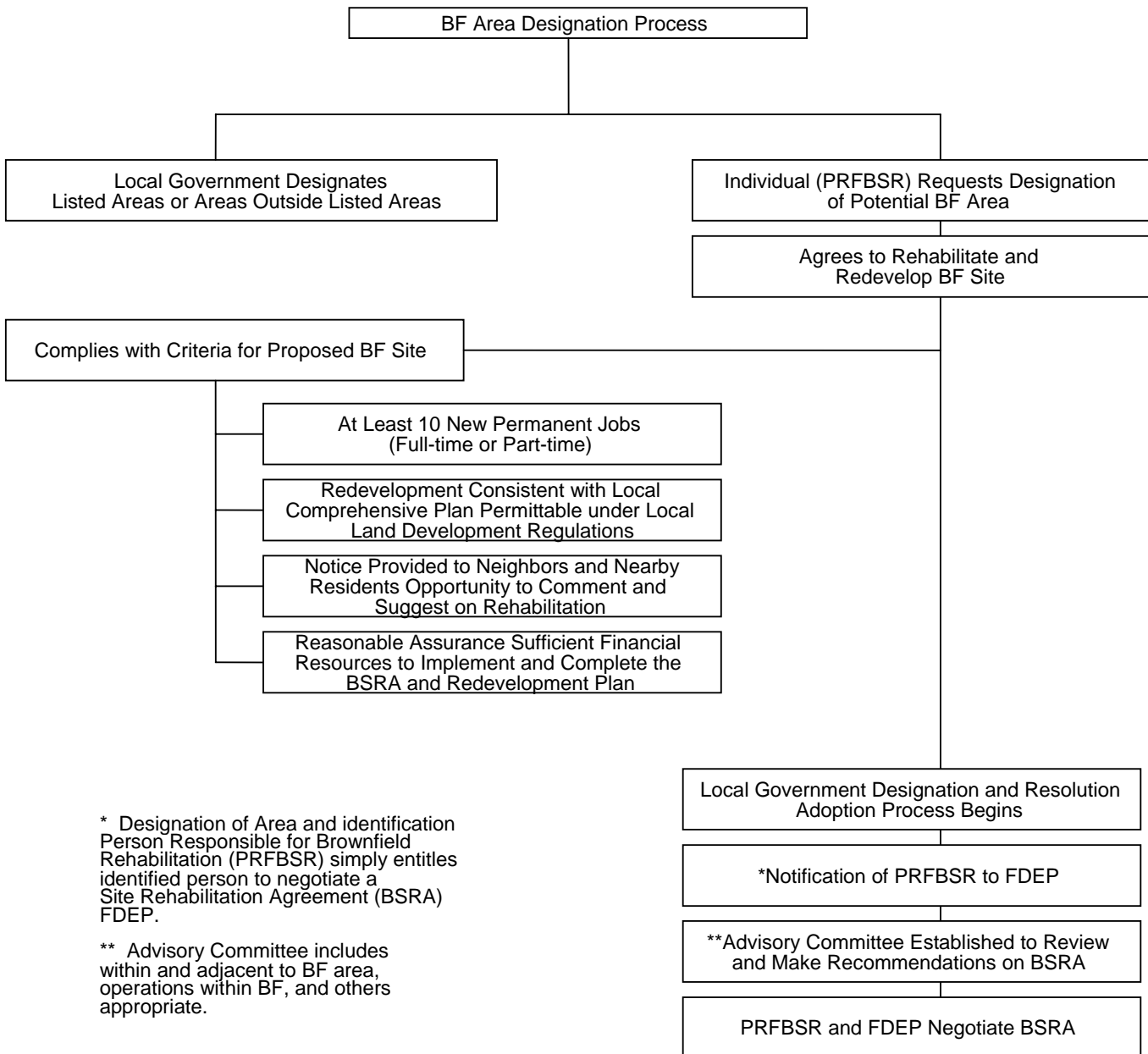
Application Completeness Review Completed by: \_\_\_\_\_

\_\_\_\_\_ Application Complete \_\_\_\_\_ Application Incomplete (Specify reason[s] below):

\_\_\_\_\_  
Signature of Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

BOCC HEARING DATE FOR DESIGNATION OF SITE AS A BROWNFIELDS AREA: \_\_\_\_\_

## PINELLAS COUNTY Brownfields (BF) Area Individual Designation



\* Designation of Area and identification Person Responsible for Brownfield Rehabilitation (PRFBSR) simply entitles identified person to negotiate a Site Rehabilitation Agreement (BSRA) FDEP.

\*\* Advisory Committee includes within and adjacent to BF area, operations within BF, and others appropriate.