



**THE CITY OF DAYTONA BEACH 2026  
GROWTH MANAGEMENT & PLANNING  
UNIFORM DEVELOPMENT REVIEW APPLICATION**  
<http://www.DaytonaBeach.gov/>

Application submittals are due by Thursday at noon and should be delivered to:  
The City of Daytona Beach  
Attn: Planning – Doug Gutierrez  
Growth Management & Planning  
301 South Ridgewood Avenue, Room 240  
Daytona Beach, FL 32114

A Pre-Application meeting with Staff may be required\* prior to submitting an application to discuss the project's feasibility, anticipated review track, submittal requirements, and procedures. This requirement can be found in Section 3.3.A and Table 3.2 of the LDC. Contact Doug Gutierrez, Planning Manager, at 386.671.8160 to schedule a Pre-Application meeting with the City's Technical Review Team (TRT). After initial contact with Staff, the Applicant may be advised to have further preliminary discussions with Staff.

TYPE OF REQUEST:		PRE-APP MTG DATE IF APPLICABLE:		/ / 20__	
Major Site Plan*	Variance BOA*	Rezoning*			
Minor Site Plan	LDC Text Amendment	Planned Development Rezoning*			
Special Use*	Minor Preliminary Plat	Planned Development Amendment			
Public Use*	Major Preliminary Plat*	Large Scale Comp Plan Amendment*			
Temporary Use (Special Event)	Final Plat	Small Scale Comp Plan Amendment*			
Temporary Use (Outside Activity)	ROW Vacation	Excess Boat Slip Allocation			
Annexation-Voluntary	Certificate of Appropriateness (Major)*	Interpretation of Unlisted Use			
Semipublic Use*	Historic Overlay Amendment*	Use Determination			
Easement Vacation	No Contravene	Parcel (Lot) Line Adjustment			
Property Analysis	Parcel (Lot) Combination	Other (Please Describe):			
Minor Subdivision (Lot Split)	Traffic Impact Analysis (TIA)				
In a Redevelopment Area?	<input type="checkbox"/> Ballough Road	<input type="checkbox"/> Downtown	<input type="checkbox"/> South Atlantic	<input type="checkbox"/> Midtown	<input type="checkbox"/> Main Street

**SUMMARY OF APPLICATION REQUEST (PROJECT DESCRIPTION):**

**SITE & APPLICANT INFORMATION: ALL INFORMATION MUST BE COMPLETED (<1 Owner of Record/< 3 Parcels, use additional sheets)**

<b>PROJECT NAME:</b>				
12-Digit Tax Parcel ID Number:				
Street Address:				
12-Digit Tax Parcel ID Number:				
Street Address:				
12-Digit Tax Parcel ID Number:				
Street Address:				
<b>SITE INFORMATION</b> (Entire Project v. Each Parcel):	<b>Future Land Use Designation (FLU):</b>	<b>Zoning Designation:</b>	<b>Gross Sq. Ft. Floor Area:</b>	<b>Total Parcel(s) Acreage:</b>
Existing:				
Proposed:				
<b>Property Owner (Provide Proof of Ownership)</b>				
Company/Contact Name:			Phone:	
Street Address:			E-mail:	
City & State:			Zip:	
<b>Lead Designer, if any (Provide Owner Authorization Form)</b>				
Company/Contact Name:			Phone:	
Street Address:			E-mail:	
City & State:			Zip:	
<b>Applicant/Authorized Agent, if any (Provide Owner Authorization Form)</b>				
Company/Contact Name:			Phone:	
Street Address:			E-mail:	
City & State:			Zip:	
Applicant/Agent Signature:				<b>DATE:</b>
Print Name:				

PLEASE VERIFY YOU ARE USING THE MOST RECENT APPLICATION AVAILABLE, FOUND AT [WWW.DAYTONABEACH.GOV](http://WWW.DAYTONABEACH.GOV) UNDER PLANNING DEPARTMENT APPLICATION FORMS