

Application Package
DEMOLITION of Florida Master Site File Structures

Application Number _____ - **F M S F** _____
(For Official Use Only)

Date Received by City Auditor and Clerk: _____



Historic Preservation

DEMOLITION Florida Master Site File Structures APPLICATION PACKAGE

FEES DUE AT SUBMISSION (include Check, payable to City of Sarasota):

_____	\$315.69 – Demolition Review FMSF per Section IV-823 (a); or Section IV-823 (b) (1); or Section IV-823 (b) (2) -- (Administrative Review)
_____	\$864.11 – Demolition Review FMSF per Section IV-823 (b) -- (Historic Preservation Board Review)

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Applicability:

Demolition of FMSF structures require either Staff or Historic Preservation Board approval prior to issuance of a demolition permit if the building(s) or structure(s) is potentially eligible for consideration by the National Register of Historic Places, historic designation by the City of Sarasota, or as a contributing building to a historic district.

Application and Approval Process:

1. **Building Permit for Demolition Application, Completeness Review:** Applicants should submit the required forms for a building permit for demolition to the Development Services Department. The Development Services Department will refer the completed Building Permit for Demolition Application to the Planning Department's Historic Preservation staff and/or Historic Preservation Board for review.
2. **Florida Master Site File Structure Demolition Application:** Applications for demolition of Florida Master Site File structures are to be filed with the City Auditor and Clerk's Office. Please see the attached Submission Requirements Check List - FMSF Demolition.
3. **Completeness Review:** Upon receipt of a FMSF Demolition Application the Planning Department will review the application for completeness and may request additional information from the applicant.
4. **Historic Review:** If upon a historic review of the structure by staff it is determined the FMSF structure is non-contributing or is not eligible for either local or national designation, the Planning Department may authorize demolition of the non-contributing structure.
5. **Historic Preservation Board Action:** Structures that are determined by staff's historic review to be contributing to a Historic District or individually eligible for Local or National Designation require approval by the majority vote of the Historic Preservation Board. The applicant should be sure that a complete set of documents, including a narrative description of the measures taken to avoid, minimize or mitigate the adverse effect to the historic resource, should be submitted with their application.
6. **Agenda Deadline for the Historic Preservation Board:** Applications for Demolition - FMSF Structures must be filed twenty-one (21) days prior to the Board meeting at which the applicant desires to present the proposed application. The Board normally meets on the second Tuesday of each month.
7. **Historic Preservation Action:** The Historic Preservation Board will hold a public review on each application for Demolition of FMSF Structures. The applicant, or the legal agent of the

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applicant, must attend the Historic Preservation Board Meeting to explain the request to the Board. Following the Historic Preservation Board review, the Board may grant, grant with conditions, or deny the Application for Demolition.

8. **Certificate of Approval:** After the Board grants approval, or approval with conditions, the Planning Department will issue a FMSF Structure Demolition Approval to Permitting staff. A copy of the Certificate of Approval for FMSF Structure demolition will be issued to the applicant with the demolition permit.

Attachments:

- Application Forms - Demolition of FMSF Structure
- Submission Requirements Checklist - Demolition of FMSF Structure
- Demolition Questionnaire
- Special Power of Attorney Affidavit Forms

Further Information:

When materials from the structure to be demolished require re-used the applicant should contact salvage organizations. For further information call Dr. Clifford Smith of the Planning Department at (941) 263-6585.

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Florida Master Site File Structure Demolition Approval By Staff Application

CITY OF SARASOTA
PLANNING DEPARTMENT
1565 1ST STREET
SARASOTA, FL 34236
(941) 263-6585

1. Name of Applicant: _____
2. FMSF Demolition Application No.: _____ -FMSF- _____
3. Building/Demolition Permit No.: _____
4. Property Address: _____
5. Proposed Action: Demolition of _____

Zoning Code Section IV-823 (a) Non-contributing or Ineligible Structures for either Local or National Designation states:

"The Neighborhood and Development Services Director may authorize demolition of any Florida Master Site File non-contributing structure or building that is not eligible for either local or national designation once the historic review has been completed."

6. ***Staff Evaluation:*** This is to certify that a Historic Review of the subject, non-contributing structure has been completed by staff of the Planning Department and that Approval of Demolition of the FMSF Structure described herein is consistent with the Sarasota City Plan and satisfies the applicable Zoning Code Standards for Review.
7. A Historic Review was completed on _____ and the structure is not eligible for the National Register of Historic Places. The structure is not eligible for Local Historic Designation. The structure is not eligible as a Contributing Historic Structure to a Historic District.

Application Date: _____

Copy to Applicant
Copy to Department File
Copy Posted with Building Permit
Copy to FMSF
Copy to Clerk's Office

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Florida Master Site File Structure Demolition Approval By Staff Application

CITY OF SARASOTA
PLANNING DEPARTMENT
1565 1ST STREET
SARASOTA, FL 34236
(941) 263-6585

1. Name of Applicant: _____
2. FMSF Demolition Application No.: _____ -FMSF- _____
3. Building/Demolition Permit No.: _____
4. Property Address: _____
5. Proposed Action: Demolition of _____

Zoning Code Section IV-823 (b) Structures contributing to a historic district or structures individually eligible for local or national designation.

Staff recommendation may include a waiver from the historic preservation board review per this section for structures contributing to a historic district or structures individually eligible for local or national designation provided one of the following two conditions are met:

- (1) A staff recommendation is completed stating the historic resource is not eligible or a contributing resource due to alterations to the building; or***
- (2) Documentation submitted by a Florida Licensed Structural Engineer attesting to the degradation and degraded condition of the building to the point the structure is beyond reasonable restoration measures to repair the building.***

- 6. Staff Evaluation:** This is to certify that a Historic Review of the subject, structure has been completed by staff of the Planning Department and that Approval of Demolition of the FMSF Structure described herein is consistent with the Sarasota City Plan and satisfies the applicable Zoning Code Standards for Review. Section IV-823 (b) (____)
7. (A) A Historic Review was completed on _____ and per Section IV-823 (b) (1) the structure is no longer eligible for the National Register of Historic Places. The structure is no longer eligible for Local Historic Designation. The structure is no longer eligible as a Contributing Historic Structure to a Historic District.

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7. (B) A Historic Review was completed on _____ and per Section IV-823 (b) (2) the structure was eligible for the National Register of Historic Places, or the structure was eligible for Local Historic Designation, or the structure was eligible as a Contributing Historic Structure to a Historic District; however, it has degradation and is in a degraded condition to the point the structure is beyond reasonable restoration measures to repair the building.

Application Date: _____

Copy to Applicant
Copy to Department File
Copy Posted with Building Permit
Copy to FMSF
Copy to Clerk's Office

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Submission Requirements Section IV-823 (b) Historic Preservation Board Review <i>NOTE: All items are to be folded to approximately 8 ½ X 11" size, collated and assembled into complete sets.</i>		Please Check
	Original and two (2) copies of this FMSF Structure - Demolition Application Package. <i>(Includes checklist, application forms, demolition documents, photographs, and questionnaire for those application to be reviewed by the Historic Preservation Board)</i>	
	Original and two (2) copies of the Special Power of Attorney Affidavit. <i>[If applicable].</i>	
	Copies of Demolition documents submitted with a Building Permit Application for Demolition, which have been reviewed for completeness by the Building Division, including <i>(for those application to be reviewed by the Historic Preservation Board)</i> : ○ Ten (10) complete sets of demolition plans, no larger than 11 x 17 in size. ○ Original and two (2) copies of a written, detailed description of the scope of work.	
	Three (3) sets of photographs showing all elevations of the existing structure(s), plus the structure(s) relationship to the site <i>(for those application to be reviewed by the Historic Preservation Board)</i> . <i>(Digital Photographs on CD or Flash Drive are acceptable)</i>	

I HEREBY CERTIFY THAT THE INFORMATION STATED IN THE ATTACHED APPLICATION FOR CERTIFICATE OF APPROPRIATENESS IS TRUE AND CORRECT.

Name (please print)

(Signature)

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Approval Application for a Florida Master Site File Structure - DEMOLITION

1. Type of Structure to be Demolished: _____
2. Site Address: _____
3. Tax PIN #: _____ Existing Zoning: _____
4. Legal Description:

☐ (Check if Attached)
5. List item(s) to be Permitted:

6. Representative's Name: _____
☐ Check if Representative/Agent (requires a Special Power of Attorney, see attached form)
 - a. Mailing address: _____
(Street number and name, city, and zip code.)
 - b. Phone: _____ Fax: _____ E-Mail: _____
7. Owner(s) Name: _____
 - a. Mailing address: _____
(Street number and name, city, and zip code)
 - b. Phone: _____ Fax: _____ E-Mail: _____
8. Owner's Signature(s): _____ Date: _____
9. Agent's Signature (s): _____ Date: _____

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QUESTIONNAIRE

PLEASE PRINT OR TYPE - If insufficient space is provided, please attach your response and any supplemental materials or explanation.

Complete for Compliance with the Land Development Regulations, Section IV-823 b
Applications to be Review by Historic the Preservation Board

In approving the issuance of a demolition permit, the Historic Preservation Board will consider the criteria listed in the City of Sarasota Land Development Regulations, Section IV-823 b, Demolition Stay - Florida Master Site File Structures (see below).

Please explain how the proposed demolition will comply with each of the criterion listed below.

1. The historic or architectural significance of the building or structure.

2. The importance of the building or structure to the ambiance of a district, if applicable.

3. Whether salvage of elements of building or structure because of their design, texture, material, or detail is possible.

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4. The future utilization of the site.

5. Whether documentation of the building or structure can be or has been completed.

6. Whether the building or structure could be moved to a different location, considering its physical condition, its current location and whether the anticipated expense of the move would be economically feasible.

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SPECIAL POWER OF ATTORNEY AFFIDAVIT (NOT CORPORATION)

**STATE OF FLORIDA
COUNTY OF SARASOTA**

This _____ day of _____
I, _____ of _____
the ☐ owner ☐ contract purchaser of _____
(describe zoning lot(s) by address and tax PIN number and attach legal description) make, constitute,
and appoint _____
of _____ (insert address), my true and lawful attorney-in-fact,
and in my name, place and stead giving unto said _____
full power and authority to do and perform all acts and make all representations necessary, without any
limitations whatsoever, to make application for said Certificate of Appropriateness-Demolition
Application.

The right, powers, and authority of said attorney-in-fact herein granted shall commence and be in full
force and effect on this _____ day of _____, _____ and shall remain in full force and effect
thereafter until actual notice, be certified mail, return receipt requested is received by the City of Sarasota
Planning & Development Division stating that the terms of this power have been revoked or modified.

Signature - Owner/Contract Purchaser (circle one)

Print Name: _____

**STATE OF FLORIDA
COUNTY OF SARASOTA**

The foregoing Special Power of Attorney Affidavit was acknowledged before me this _____ day of _____, _____, by _____ who is personally known to me or has produced _____ as identification.

Notary Public
State of Florida at Large

My commission expires: _____

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SPECIAL POWER OF ATTORNEY AFFIDAVIT (CORPORATION)

STATE OF FLORIDA
COUNTY OF SARASOTA

This _____ day of _____, _____, I, _____ as
_____ (title of officer) of _____ (name of corporation),
a _____ (state of incorporation) corporation, on behalf of the corporation as
the ☐ owner ☐ contract purchaser of _____ (describe zoning lot(s)
by address and tax PIN number and attach legal description) make, constitute, and appoint
_____ of _____ (insert
address), my true and lawful attorney-in-fact, and in my name, place and stead giving unto said
_____ full power and authority to do and
perform all acts and make all representations necessary, without any limitations whatsoever, to make
application for said Certification of Appropriateness–Demolition Application.

The right, powers, and authority of said attorney-in-fact herein granted shall commence and be in full
force and effect on this _____ day of _____, _____ and shall remain in full force and effect
thereafter until actual notice, be certified mail, return receipt requested is received by the City of Sarasota
Planning & Development Division stating that the terms of this power have been revoked or modified.

Name of Corporation

By: _____
(Signature)

Print Name: _____

Title: _____

STATE OF FLORIDA
COUNTY OF SARASOTA

The foregoing Special Power of Attorney Affidavit was acknowledged before me this _____ day of
_____, _____, by _____ (title of officer) of
_____ (name of corporation), on behalf of the corporation. He/she is
personally known to me or has produced _____ as identification.

Notary Public
State of Florida at Large

My commission expires: _____