

**Attachment 8**  
**Verification Form**

**DEVELOPMENT PLAN AND CONDITIONAL USE APPLICATION**  
 City of Key West Planning Department  
 604 Simonton Street, Key West, FL 33040  
 (305 - 809-3720)



- 12) Has subject Property received any variance(s)? Yes  No   
 If Yes: Date of approval 1/12/98 Resolution # 98-27 *for condominium buildings' height.*  
 Attach resolution(s). *See attached history of the property. Previous settlement agreement (Res. 98-209) has expired.*
- 13) Are there any easements, deed restrictions or other encumbrances on the subject property?  
 Yes  No  If Yes, describe and attach relevant documents.  
Easements for the driveway were granted & are included with the deed
- 14) A. For *Conditional Uses and Development Plans*, provide the information requested on the attached **Conditional Use and Development Plan** sheet.  
 B. For *Conditional Uses*, include also the **Conditional Use Criteria** required under Chapter 122, Article III, Sections 122.61 and 122.62 of the Land Development Regulations (copy attached).  
 C. For *Major Development Plans*, provide also the additional information requested on the **Development Plan Submission Materials** (Sections 108.226 through 108.232 of the Land Development Regulations, copy attached) and other information as determined by the Planning Staff.

Please note, development plan and conditional use approvals are quasi-judicial hearings and it is improper to speak to a Planning Board member or City Commissioner about the project outside of the hearing.

**Verification**

I, Joanne Alexander (please print), being duly sworn, depose and say  
 Name of Applicant

that I am (check one) the owner  / owner(s) legal representative  of the property which is the subject matter of this application. All of the answers to the above questions, drawings, plans and any other attached data to this application, are true and correct to the best of my knowledge and belief and that if not true or correct, are grounds for revocation of any action reliant on said information.

Joanne Alexander  
 Signature of Applicant

Subscribed and sworn to (or affirmed) before me on April 30<sup>th</sup> 2009 (date) by \_\_\_\_\_ (name of affiant, deponent or other signer) He/She is personally known to me or has presented \_\_\_\_\_ as identification.

Tiffany Rae Johnson  
 Notary's Signature and Seal



\_\_\_\_\_  
 Name of Acknowledger typed, printed or stamped

\_\_\_\_\_  
 Title or Rank

\_\_\_\_\_  
 Commission Number

