



**TOWN OF PALM BEACH**  
Planning, Zoning & Building Department  
360 South County Road  
Palm Beach, FL 33480  
(561) 838-5431 • [www.townofpalmbeach.com](http://www.townofpalmbeach.com)

## DEVELOPMENT REVIEW APPLICATION

Updated 07/26/2022

<b>FILE NUMBER:</b> N/A		<b>ZONING NUMBER (if applicable):</b> ZON-23-040	<b>DATE:</b> 1/5/23
<b>ADDRESS:</b> N/A			
<input type="checkbox"/> <b>LANDMARKS</b> <input type="checkbox"/> Certificate of Appropriateness for design approval <input type="checkbox"/> Certificate of Appropriateness for demolition <input type="checkbox"/> Historically Significant building <input type="checkbox"/> Historic district/ Site designation / undesignation <input type="checkbox"/> Other (expand below) <input type="checkbox"/> Waiver <input type="checkbox"/> Tax abatement project		<input type="checkbox"/> <b>ARCOM</b> <input type="checkbox"/> Design review approval- <b>major project</b> <input type="checkbox"/> Design review approval- <b>minor project</b> <input type="checkbox"/> Design review approval- <b>minor no notice</b> <input type="checkbox"/> Demolition <input type="checkbox"/> Other (expand below)	
<input type="checkbox"/> <b>TOWN COUNCIL</b> <input type="checkbox"/> Special exception <input type="checkbox"/> Variance(s) <input type="checkbox"/> Site plan review <input type="checkbox"/> Division of land / replat <input checked="" type="checkbox"/> Amendment to the Town's Zoning Code or Zoning Map or Comprehensive Plan or Future Land Use Map <input type="checkbox"/> Other (expand below)			
<input type="checkbox"/> <b>Other:</b>			
<b>Property Information</b>			
ADDRESS OF PROPERTY N/A			
LEGAL DESCRIPTION (if necessary attach as separate exhibit) N/A			
PROPERTY OWNER NAME N/A			
CONTACT NUMBER AND/OR EMAIL N/A			
APPLICANT NAME (if different than owner) James M. Crowley, Esq.			
CONTACT NUMBER AND/OR EMAIL 561.650-0633/JCCrowley@Gunster.com			
<b>Authorized Representative(s) Information (if applicable)</b>			
NAME James M. Crowley		<input checked="" type="checkbox"/> Attorney <input type="checkbox"/> Agent <input type="checkbox"/> Other _____	
CONTACT PHONE 561.650-0633		EMAIL ADDRESS JCCrowley@Gunster.com	

**Summary of Request (NOTE: A separate Letter of Intent (LOI) is required as part of the submittal prerequisite)****PROVIDE A BRIEF SCOPE OF PROJECT REQUEST**

Proposal to amend the Town of Palm Beach's Zoning Code to allow for arcades or colonades to extend off of private property and into public right-of-way in the Commercial -Town Serving (C-TS) zoning district to promote pedestrian activity, provided certain location and dimensional requirements are met, the arcade or colonade does not interfere with vehicular traffic or parking, and the arcade or colonade is approved by the Architectural Commission or Landmarks Preservation Commission (whichever has jurisdiction) and Town Council through the Special Exception process.

**Project Information**

Is there an existing building(s) on the site?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Does the project include minor exterior demolition?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Does the project include total demolition?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Does the project include exterior alterations?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Does the project include site plan modifications?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Provide the total square footage of the new construction.	N/A	SF.
Provide the gross square footage of the new construction (including parking and all usable area).	N/A	SF.

**Design Professional (primary design professional responsible for project design)**

NAME: N/A	<input type="checkbox"/> Architect
LICENSE #:	<input type="checkbox"/> Contractor
<input type="checkbox"/> Check this box if you are a Commission member that will result in a voting conflict of interest	<input type="checkbox"/> Landscape Architect
	<input type="checkbox"/> Engineer
	<input type="checkbox"/> Other _____
CONTACT PHONE	EMAIL ADDRESS

**Please read the following and acknowledge below:**

- ☒ As part of the project approval, I voluntarily agree to dedicate a utility easement supporting the undergrounding project to the satisfaction of the Town of Palm Beach, which may include the installation of aboveground electrical equipment and pads to be placed on my property.

The aforementioned is acknowledged by:

☐ Owner of the subject property

☒ Authorized representative

**SIGNATURE**

James M. Crowley

**PRINT NAME**

January 5, 2023

**DATE SIGNED**

**“Exhibit A”**  
**NOTICE AFFIDAVIT**



FILE NUMBER: ZON-23-040

FILE NUMBER:

STATE OF FLORIDA  
COUNTY OF PALM BEACH, TOWN OF PALM BEACH

BEFORE ME THIS DAY PERSONALLY APPEARED James M. Crowley

WHO BEING DULY SWORN, DEPOSES AND SAYS THAT:

1. He/she is the owner, or the owner's authorized agent, of the real property legally described in the Application; and
2. The accompanying Property Owners List is, to the best of his/her knowledge, a true and correct list of all property owners' mailing addresses and property characteristics as shown on the official tax rolls for the subject property and all other property within **radius distance if required, of the real property described in the application, or other radius distance if required, of all other property** part by the owner of the real property described in the Application; and
3. A copy of each page of the application plus project Notice of Public Hearing and Property Owners (as described above in 2.) and **TOWN HALL** is included in the application and will be mailed **at least 30 days prior** to the meeting using certified mail to the Appraiser's office.

Subject to staff  
confirmation on  
notice. I don't  
think mail notice is  
required.

**FURTHER AFFIANT SAYETH NOT.**

The foregoing instrument was acknowledged before me this 5<sup>th</sup>,   ,   , by \_\_\_\_\_,  
Month/Year

James M. Crowley

(Name of person acknowledging)

who is personally known to me or who has produced

as identification.

(Type of identification)

Applicant's Signature

Odette Pease

Notary as to Owner or to Authorized Agent

James M. Crowley, Esq./Gunster Law Firm

Applicant's (or Agent's) Printed Name

777 So. Flagler Dr., Ste. 500 E, WPB, FL 33401

Applicant's (or Agent's) Address

My Commission Expires: 9/3/2025