

**OFFICE USE ONLY**

DATE FILED: \_\_\_\_\_ SRA NUMBER: \_\_\_\_\_  
REVIEW FEE: \_\_\_\_\_ RECEIPT NO: \_\_\_\_\_ ORDINANCE NO. \_\_\_\_\_  
CONCURRENCY FEE: \_\_\_\_\_ RECEIPT NO: \_\_\_\_\_ CERT. CAPACITY NO: \_\_\_\_\_



**ST. LUCIE COUNTY**  
**GROWTH MANAGEMENT DEPARTMENT**  
2300 Virginia Avenue  
Fort Pierce, FL 34981-5652  
772-462-2822

**APPLICATION FOR STEWARDSHIP RECEIVING AREA (SRA)  
DESIGNATION**

**DIRECTIONS**

Please complete the requested information and submit all items to the St. Lucie County Growth Management Department, 2300 Virginia Avenue, Ft. Pierce, FL 34982. The proper non-refundable application fee must accompany all applications. For assistance in submitting the application, please contact the St. Lucie County Growth Management Department, Planning Division.

*A pre-application conference is also required pursuant to Section 4.05.08.D of the Land Development Code.*

**REVIEW FEES and THRESHOLDS**

	<b>STEWARDSHIP RECEIVING AREA (SRA)</b>	
<b>Required Review Fee</b>	Less than 20 acres	\$1,500.00
	20 acres to 49 acres	\$1,800.00
	50 + acres	\$2,000.00 + \$5.00 per acre over 50 acres
<b>Concurrency Fee</b>	\$250.00	
<b>Minimum Size</b>	Must meet SRA Gross Acreage Requirements	

Initial submission shall include the following:

- 1) One (1) original of the **completed SRA application**
- 2) Twenty (20) copies of the **SRA application materials**
- 3) Twenty (20) copies of the conceptual plan (24 inches by 36 inches sheets)
- 4) Twenty (20) copies of the required boundary and topographic survey
- 5) Two (2) copies of Aerial.
- 6) One (1) copy of the St. Lucie County Property Appraiser Tax Map with property under petition highlighted.
- 7) Five (5) copies of the Transportation Impact Report (if applicable).
- 8) Five (5) copies of the Environmental Impact Report (if applicable).



- 9) Five (5) copies of the Preliminary Drainage Data.
- 10) If a Development of Regional Impact (DRI) has also been submitted for this project, any items within the DRI that address SRA requirements will not have to be provided as part of this SRA application (i.e. Transportation Impact Report, Preliminary Drainage Report etc.).

**All applications for a Stewardship Receiving Area (SRA) must be completed and filed with the Department before 4:30 PM each business day to meet applicable filing deadlines. For an application submission to be determined complete, all required materials must be present at the time of submission.**

PROJECT INFORMATION					
<b>LOCATION</b>					
<b>SRA NAME</b>					
<b>PROPERTY TAX ID NUMBERS</b> (attach extra sheets if necessary)					
<b>LEGAL DESCRIPTION</b> (attach extra sheets if necessary)					
<b>SECTION</b>		<b>TOWNSHIP</b>		<b>RANGE</b>	
<b>PARCEL SIZE:</b>	<b>ACRES</b>		<b>SQ. FT.</b>		
<b>ZONING DISTRICT</b> (without RLSA Overlay)				<b>FUTURE LAND USE CLASSIFICATION</b> (without RLSA Overlay)	
<b>DESCRIPTION OF PROJECT</b> (attach extra sheets if necessary)					
<b>TYPE OF CONSTRUCTION</b> (Check all appropriate boxes)	<input type="checkbox"/> residential	<b>Number of residential units</b>			
	<input type="checkbox"/> goods and services	<b>Total sq. ft. (by use)</b>			
	<input type="checkbox"/> civic, governmental and institutional services	<b>Total sq. ft. (by use)</b>			
	<input type="checkbox"/> other (please specify	<b>Total sq. ft. (by use)</b>			



**I hereby submit and certify the application is in compliance with the St. Lucie County Comprehensive Plan.**

\_\_\_\_\_  
SIGNATURE OF AGENT

\_\_\_\_\_  
DATE

**ST. LUCIE COUNTY  
APPLICATION FOR STEWARDSHIP RECEIVING AREA CHECKLIST**

**Have you shown or provided the following required information:**

**BOUNDARY & TOPOGRAPHIC INFORMATION:**

(Refer to Section 11.02.09 (A)(2), St. Lucie County Land Development Code)

	Yes	No
<b>Aerial Photograph (subject property highlighted)</b>		
<b>Location sketch</b>		
<b>Boundary/Topographic Survey</b>		
<b>Positive Outfall</b>		
<b>Floodplain</b>		
<b>Drainage Basin Boundaries</b>		
<b>Preliminary, SFWMD Permit Data</b>		

**SRA PLAN and SRA MASTER PLAN INFORMATION:**

(Refer to Section 4.05.08(E), St. Lucie County Land Development Code)

	Yes	No
<b>Prepared by an AICP certified urban planner, a Florida Licensed Professional Engineer, qualified environmental consultant and Florida Licensed registered landscape architect (indicate names and certification/license numbers)</b>		
<b>SRA Master Plan Content</b>		
<b>Title of SRA and Developer Name</b>		
<b>Scale, date, north arrow</b>		



		Yes	No
	<b>Boundaries of subject property, HSAs, HYSAs, and WRAs located within or adjacent to the SRA, all existing roadways within and adjacent to the site, watercourses, and other important physical features within and adjoining the proposed development</b>		
	<b>Identification of all proposed Context Zones within the SRA, proposed pedestrian network, proposed open space, proposed conservation/preservation areas, lakes and/or other water management facilities, the location and function of all areas proposed for dedication or to be reserved for community and/or public use, and areas proposed for recreational uses</b>		
	<b>The location of all proposed major internal rights of way</b>		
<b>Identification/location/quantification of the full range of uses, including accessory uses that provide the mix of services to, and are supportive of, the residential population of an SRA, and shall include, as applicable, the following:</b>			
	<b>Title page to include SRA project name</b>		
	<b>Index/table of contents</b>		
	<b>List of exhibits</b>		
	<b>Statement of compliance with the RLSA Overlay and the SA Overlay District Regulations</b>		
	<b>General location map</b>		
	<b>Property ownership and description of site</b>		
	<b>Description of project</b>		
	<b>Legal description of the SRA boundary</b>		
	<b>Overall acreage of the SRA that requires the consumption of Stewardship Credits and proposed gross density for the SRA</b>		
	<b>Identification of all proposed land uses within each context zone</b>		



		Yes		No		
	<b>Design standards for each context zone consistent with Section 4.05.08.G</b>					
	<b>Identification of inclusion of very-low, low and moderate income housing within the SRA</b>					
	<b>Phasing plan</b>					
	<b>Natural Resource Index Assessment as required in Section 4.05.08.D.1.(D)(4)</b>					
	<b>Location and nature of all existing or proposed public facilities (or sites) such as schools and parks</b>					
	<b>Typical cross sections for all arterial, collector, and local streets</b>					
	<b>Development commitments for all infrastructure</b>					
	<b>SRA Plan amendment provisions</b>					
<b>Stewardship Credit Use and Reconciliation</b>						
	<b>Number of acres within the SRA designated “public benefit use” that do not require the consumption of Stewardship Credits</b>	[ ]	<b>Acres</b>	[ ]	<b>Acres</b>	
		[ ]	<b>DU/Acre gross</b>	[ ]	<b>DU/acre gross</b>	
	<b>Number of acres of “excess” open spaces within the SRA that do not require the consumption of credits</b>	[ ]	<b>Acres</b>			
	<b>Number of acres of WRAs or HSAs inside or adjacent to the SRA boundary but not included in the SRA designation</b>	[ ]	<b>Acres</b>			
	<b>Number of acres of SRA that consume Credits</b>	[ ]	<b>Acres</b>			
	<b>Number of Stewardship Credits required for the SRA (7 Credits per acre of SRA)</b>	[ ]	<b>Credits</b>			



		Yes	No
	<b>Attach documentation that the applicant has acquired or has the contractual right to acquire Stewardship Credits</b>		
	<b>Provide a descriptive reference to one or more approved or pending SSA Designation Application(s) from which the Stewardship Credits are being obtained.:</b>		
	<b>Attach copies of SSA Stewardship Credit Agreement and related documentation, including:</b>		
	<b>SSA Application Number(s)</b>		
	<b>Pending companion SSA Application Number(s)</b>		
	<b>SSA Designation Ordinance or Ordinance Number(s)</b>		
	<b>SSA Stewardship Credit Agreement(s)</b>		
	<b>SSA Easement Agreement</b>		
	<b>Stewardship Credits Database Report</b>		



		Yes		No	
<p><b>Complete the following summary table that identifies the exchange of all Stewardship Credits that involve the SRA and all of the associated SSAs from which the Stewardship Credits are being obtained:</b></p>					
		<b>Credits From SSA No.</b>	<b>Credits From SSA No.</b>	<b>Credits From Pending SSA</b>	<b>Total Credits</b>
	<b>Total SSA Credits Originally Approved</b>				
	<b>Credits Required for This SRA</b>				
	<b>Credits Previously Transferred to This SRA</b>				
	<b>Credits Being Transferred to This SRA</b>				
	<b>Balance of SSA Credits Remaining</b>				
<p><b>If applicable, the DRI Master Plan, or PDA, shall be included as part of the SRA Designation Application. It shall identify the location of the SRA being designated, and any previously designated SRAs within the DRI</b></p>				<p>[    ] DRI [    ] Not DRI</p>	

<p><b>Other information which Applicant believes should be considered with this Application (attach additional sheets, if necessary).</b></p>	
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**SRA PUBLIC FACILITIES IMPACT ASSESSMENT(S) MUST COVER:**

	<b>Yes</b>	<b>No</b>
<b>Transportation</b>		
<b>Potable Water</b>		
<b>Wastewater</b>		
<b>Irrigation Water</b>		
<b>Stormwater Management</b>		
<b>Solid Waste</b>		
<b>Schools</b>		
<b>Parks and Recreation</b>		

**SRA ECONOMIC ASSESSMENT:**

	<b>Yes</b>	<b>No</b>
<b>Economic Assessment</b>		



**SPECIAL NOTICE  
(PLEASE READ BEFORE SIGNING ACKNOWLEDGMENTS BELOW)**

**Submission of this application does not constitute the granting of approval. All appropriate requirements must be met prior to this project being presented for approval to the appropriate authority. St. Lucie County reserves the right to request additional information that is pursuant to the Land Development Code to ensure a complete review of this project.**

**ACKNOWLEDGMENTS**

**Applicant Information (Property Developer)**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Applicant Information**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Property Owner Information**

This application will not be considered complete without the notarized signature of **all property owners of record**, which shall serve as an acknowledgment of the submission of this application for site plan approval. The property owner's signature below shall also serve as authorization for the above applicant or agent to act on behalf of said property owner.

\_\_\_\_\_  
**Property Owner Signature**

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_

\_\_\_\_\_  
**Property Owner Name (Please Print)**

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_

**STATE OF FLOIRDA  
COUNTY OF** \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who is personally known to be or who has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
**Signature of Notary**

\_\_\_\_\_  
Type or Print Name of Notary

**OFFICE USE ONLY**

**Project Reviewer:** \_\_\_\_\_

**Approval Date:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**Notary Stamp**