

City of Marco Island Growth Management Department 50 Bald Eagle Drive Marco Island, FL 34145 Phone: 239-389-5000

COMMERCIAL LAND USE AND ZONING CERTIFICATE

Applicable Sections of the Marco Island Land Development Code Chapter 30 Article II, Sec. 30-66(f)

ABOVE TO BE COMPLETED BY STAFF NOTE: If you don't know the answer, indicate "unknown." If the item doesn't apply indicate "non-applicable" or "N/A." Your application cannot be processed without a necessary information. Approval of this application can be expedited if a site plan of the property to be occupied, showing parking and surrounding uses, is submitted with the application. Application Date: Business Name:
Business Name:
Name of Business Owner (corporation/individual): Business Address: Complex Name (if any): Type of Business to be Conducted: NEW BUSINESS OR NEW OWNER OR RELOCATING EXISTING BUSINESS Number of Employees (including owner):
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Type of business previously/ presently occupying the premises:
Applicant's Name: Applicant's Phone: Applicant's Address:
Applicant Email Address:
Property owner/leasing agent name: Phone: Address:

SITE DESCRIPTION

Check the description which most closely applies:		
☐ Single-Occupancy Building ☐ Multiple- Occupancy Building ☐ Strip Mall ☐ Shopping Center/Mall ☐ Other (Describe): ☐ Office in Profession ☐ Office Co-Located ☐ Businesses	with Other	
For new building only: Building permit #: SDP #:		
For building currently vacant: Length of vacancy		
Note: You <u>must contact</u> the Marco Island Fire Department at 3 a mandatory fire safety inspection and Building Service 5059 for a mandatory site inspection. SITE USE (FLOOR AREA, SEATING & PARKING)		
Indicate approximate square footage of floor area in unit used for:		
RetailSF		
WholesaleSF		
Manufacturing/assembly/ repairSF		
• OfficeSF		
• StorageSF		
For auto repair/service station only: number of bays For restaurant/church/beauty parlor: number of seats		
For free standing building: total floor area of bldgsq. fl	•	
For office complex/multiple occupancy building only: Total number of units		
Number of parking spaces available for use by entire building/comp	lex:	
Number of parking spaces available for use by this unit only:		

Requirements for CLUZ Approval from Water and Sewer Utilities

New Food Service Facilities

- Provide seating chart inside and outside.
- Provide grease trap/interceptor sizing calculations from engineer or manufacturer of grease trap/interceptor using current Florida Plumbing Code.
- Provide specifications for selected model of interceptor/trap.
- Provide Annual Grease Damage Prevention Permit, contact KHayman@cityofmarcoisland.com
- Provide proof all utility financial requirements have been met.
- Provide DBPR "Seating Change Form"

Existing Food Service Facility New Owner

If you plan to keep the same number of seats or less no grease trap information required. However, you will need to provide Annual Grease Discharge Permit (contact Khayman@cityofmarcoisland.com) and provide DBPR "Seating Change Form". contact KHayman@cityofmarcoisland.com

If increasing number of seats:

- Provide seating chart inside and outside.
- Provide grease trap/interceptor sizing calculations from engineer or manufacturer of grease trap/interceptor using current Florida Plumbing Code.
- Provide specifications for selected model/s of interceptor/trap if installation of new interceptor/trap is required.
- Provide Annual Grease Damage Prevention Permit, contact KHayman@cityofmarcoisland.com
- Provide proof all utility financial requirements have been met.
- Provide DBPR "Seating Change Form"

Existing Food Service Facility Same Owner

Increasing number of seats:

- Provide seating chart inside and outside.
- Provide grease trap/interceptor sizing calculations from engineer or manufacturer of grease trap/interceptor using current Florida Plumbing Code.
- Provide specifications for selected model of interceptor/trap if installation of new interceptor/trap is required.
- Provide Annual Grease Damage Prevention Permit #______
- Provide proof all utility financial requirements have been met.
- Provide DBPR "Seating Change Form"

Commercial Occupational Licensing Procedures

The City of Marco Island does not issue "Occupational Licenses," otherwise known as Business Tax Receipts (BTR). The City does, however, provide the zoning compliance document required for the BTR approval from Collier County.

Following are the procedures for obtaining the BTR (Business Tax Receipt) for a commercial-based business:

- 1. The applicant should contact the City of Marco Island Growth Management Department at (239) 389-5000 prior to leasing/purchasing commercial space to ensure the potential business is an allowed use. The Growth Management Department is able to provide preliminary information to the Applicant that will be helpful to facilitate the application process from the beginning.
- 2. The Applicant must fill out the Commercial Land Use Zoning Certificate application. If the location is in a "strip center" or multi-tenant, you must also fill out the Commercial Zoning Parking Matrix form in addition to the application. Both forms can be located at: www.cityofmarcoisland.com > Forms & Applications > Growth Management. You can also request a parking matrix from your land lord. In addition we do require an approved Site Development Plan. Chapter 30, Art. 2, Sec 30-66 (f)

3. Onsite inspections are required by the Fire Department and Building Department

prior to the issuance of a Commercial Zoning Certificate. There will be an additional fire fee. Fee is based on square footage. The building inspection is included in the \$ 200.00 application fee. We will e-mail instructions on how to schedule the onsite inspections after the application review was approved. Please submit the following: Completed application ☐ Parking matrix \$200 Fee (check payable: City of Marco Island) Site Development Plan Applicant's Signature _____ Date PRINT_____ Property Owner Signature _____ Date _____ Leasing Agent Signature PRINT_____

E-mail to: gmhelp@cityofmarcoisland.com (09/2023)

NAICS#:_____ Zoning:_____ Folio #:______ Site visit completed by:______ Date:_____ ____ Approved _____ Denied ____ Hold for:______ Comments/restrictions: ______