

**SHARED PARKING - (SP) PETITION**

PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION:

NAME OF PETITIONER (or, FIRM)

NAME OF AUTHORIZED REPRESENTATIVE OF FIRM (if applicable):

ADDRESS, CITY, STATE, ZIP

PHONE NO:

LEGAL DESCRIPTION OF PROPERTY

ADDRESS OF PROPERTY

ZONING OF PROPERTY

According to Section 250816(3)(l)(3) of the Coral Springs Land Development Code, a request for shared parking may be approved only if an independent parking study, in a form acceptable to the City, is submitted with this petition. At a minimum, the following information must be furnished as back-up material with the parking study:

1. Existing building square footage
2. Proposed building square footage (if any)
3. Required and provided number of parking spaces
4. Proposed number of parking spaces (if any)
5. A list of each use on the property
6. Hours of operation for all uses on the property
7. Parking ratio of existing uses
8. Reasons and justification for shared parking

The parking study must prove that the shopping center uses are such that a sufficient disparity in peak demand for parking spaces exists to support this request for shared parking.

This is to certify that I am the owner of the subject property described in the shared parking petition. I have read this petition and the statements contained herein are true and correct to the best of my knowledge.

SIGNATURE OF PROPERTY OWNER

PRINT NAME OF PROPERTY OWNER

ADDRESS, STATE, ZIP

PHONE

As Owner, I authorize \_\_\_\_\_ to act as my agent in this matter.  
PRINT NAME

PRINT NAME, ADDRESS AND PHONE NUMBER OF REPRESENTATIVE, IF APPLICABLE

SIGNATURE OF PETITIONER

City of Coral Springs  
Shared Parking (SP) Petition

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_ PERSONALLY KNOWN  
\_\_\_ PRODUCED IDENTIFICATION  
\_\_\_ TYPE OF I.D. PRODUCED

My Commission Expires: \_\_\_\_\_

\_\_\_ DID TAKE AN OATH  
\_\_\_ DID NOT TAKE AN OATH

.....  
TO BE COMPLETED BY THE COMMUNITY DEVELOPMENT DEPARTMENT

ACCEPTED BY \_\_\_\_\_

DATE ACCEPTED \_\_\_\_\_

PETITION NO \_\_\_\_\_

**FEE: \$1,066.00 PLUS, \$50.00 RECORDING FEE (separate check please)**