



Town of Jupiter Island

PRE-REVIEW APPLICATIONS

Please **COMPLETE** this application for a preliminary review by the Administrator to determine the type of application needed for approval.

Please Submit **ONE (1)** copy of the following for this application:

- Proposed Site Plan
- **Site Data Table (Page 2 attached)**
- Existing Survey
- Exterior Elevations

PROPERTY:

Street Address: _____

Tax Parcel Number: _____ Zoning: _____

Owner: _____

APPLICANT:

Name: _____

Contact Information: Email: _____ Phone: _____

EXPLANATION OF REQUEST/SCOPE OF WORK: _____

To Be Completed by Administrator

Based on the items presented, this project will need the following application/ approval:

- Administrative Approval with a 30-day mailing**
- Development Review Board**
- Town Commission**
- Building Permit**

Date: _____ Signature: _____

Comments: _____

Site Analysis:

Address:	Zoning District:		
Planned Date of Construction:			
	Permitted	Existing	Proposed
Lot Area:			
Floor Area*:			
Principle Dwelling: (10,000 sf max)			
Accessory Structure #1: (not to exceed 1/3 square footage of principal dwelling)			
Accessory Structure #2: (not to exceed 1/3 square footage of principle dwelling)			
FAR (Floor Area Ratio): Floor Area ÷ Lot Area			
Lot Width:			
Front Yard Setback:			
Rear Yard Setback:			
Side Yard Setback: One-Story: Two-Story:			
Initial Measuring Point ("IMP"):			
Fill:	3 ft max		
Roof Height: Roof Pitch: One-Story: Two-Story:			
Exterior Wall Height: One-Story: Two-Story:	14 ft 22 ft		
Parking Spaces: (1 per bedroom, 1.5 max)			
Driveway Setback:			
Landscape Area:			
Elevation of Finish Floor:			
Elevation of LHSM: (Lowest Height Structural Member)			
FEMA Flood Zone:			

*Total Floor Area to include living space and non-living space.