



## Development and Growth Management Development Coordination Division



### **INSTRUCTIONS FOR APPLICATION – SPECIAL USE 1 ALCOHOLIC BEVERAGE (AB) SALES (AB1)**

Please be aware that these instructions are provided as a guide to assist you in submitting your application online in the City's Accela Citizen Access system. Application guidelines are derived from Chapter 27 Zoning and City Policy.

Our **interactive maps for Zoning types and locations and Alcoholic Beverage Sales locations**, respectively, are: <https://tampa.maps.arcgis.com/apps/webappviewer/index.html?id=1a234205f63d4c21b0af885ae21aa72b> and <https://tampa.maps.arcgis.com/apps/webappviewer/index.html?id=f307d92319a44ccaacc17ab4ab344feb>.

### **PLEASE READ INSTRUCTIONS THOROUGHLY**

It is recommended that you contact a representative of Development and Growth Management (DGM) at [TampaZoning@tampagov.net](mailto:TampaZoning@tampagov.net) or (813) 274-3100, option 2, prior to submitting your application to ensure that you will receive the correct guidance for your needs.

#### **Information Required by this Application:**

- Special Use Site Plan (example attached),
- Floor Plan (for restaurants, bars, and lounges -- with occupancy -- per Florida Building Code),
- Survey (see [Section 27-127\(b\)\(3\)\(b\)](#) for layer requirement) to include an 'AB Sketch (a graphical depiction with square footage measurements of the location from where the sales activity will occur, i.e., "AB Sales Area"),
- Measurements required to demonstrate compliance with distance separation criteria ([Section 27-132](#)),
- Radius map listing uses within distance separation requirements,
- Any other required material as stated in Chapter 27, Article II, Division 5 and [Section 27-156](#).

#### **Submittal of an Electronic Application**

- The application must be submitted online through the City's Accela Citizen Access (ACA) system at [aca.tampagov.net](http://aca.tampagov.net).
- All information in Accela marked with an asterisk must be completed via the online form.
- All information requested or required by the application such as the owner/agent affidavit, any Exhibits, the Survey, and the Site Plan must be uploaded into Accela into the electronic record.

#### **Fees**

- Application (record) fees will be assessed through the Accela system when the application is accepted by staff.
- Fees are determined by City Council by resolution.
- Fees are payable online via MasterCard, VISA, American Express or Discover or through e-check.
- Personal checks and cash are not accepted.

#### **Public Notice**

The AB1 application requires public notice in accordance with [Section 27-149](#) of the City of Tampa Code of Ordinances. Once your application has been accepted, City of Tampa staff will provide you with instructions, the required documents, sign(s), and scheduling guidance to complete the notice process.

## Review Time

Determination for an AB1 application shall be completed within 45 calendar days of the completed application (including all notice documents), but not less than 15 calendar days from the submittal of the completed Affidavit of Compliance required in the notice process. The time frame may be extended at the request of the applicant by 20 calendar days.

**Note:** Please check the Plat, Survey, Title Policy and all other documentation relating to your property prior to any application for design and construction. The City of Tampa and its staff DO NOT review for compliance with individual private deed restrictions and covenants.



**SPECIAL USE 1 ALCOHOLIC BEVERAGE (AB) SALES (AB1)**



**AFFIDAVIT TO APPLY FOR A ZONING CODE RELATED APPLICATION and AUTHORIZED AGENT FOR AN APPLICATION TO THE CITY OF TAMPA**

Multiple authorizations may be necessary if there is more than one property owner.

APPLICATION/RECORD NUMBER: \_\_\_\_\_

PROPERTY (LOCATION) ADDRESS(ES): \_\_\_\_\_

FOLIO NUMBER(S): \_\_\_\_\_

"That I am (we are) the owner(s) and record title holder(s) of the property noted herein"

Property Owner's Name(s): \_\_\_\_\_ \*

"That this property constitutes the subject of an application for the **SPECIAL USE 1 ALCOHOLIC BEVERAGE (AB) SALES (AB1)**."

I, THE UNDERSIGNED APPLICANT/AGENT, HEREBY CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS TRUE AND COMPLETE AND HEREBY AUTHORIZE AND ALLOW REPRESENTATIVES OF THE CITY TO ACCESS THE PROPERTY UNDERGOING REVIEW FOR THE ABOVE REFERENCED REQUEST. IF MY PROPERTY IS GATED, I WILL PROVIDE ACCESS TO THE PROPERTY UPON REQUEST FROM THE CITY. I ALSO CONSENT TO THE POSTING OF A SIGN ON MY PROPERTY IF THERE IS A THIRD-PARTY SUBMITTAL OF A PETITION FOR REVIEW.

"That this affidavit has been executed to induce the City of Tampa, Florida, to consider and act on the above described application and that the undersigned has(have) appointed and does(do) appoint the agent(s) stated herein as his/her(their) agent(s) solely to execute any application(s) or other documentation necessary to affect such application(s)" (if applicable).

AGENT'S NAME: \_\_\_\_\_

The undersigned authorizes the above agent(s) to represent me (us) and act as my (our) agent(s) at any public hearing on this matter (if applicable).

The undersigned authorizes the above agent(s) to agree to any conditions necessary to effectuate this application. Both owner and agent must sign and have their names notarized.

<p>STATE of FLORIDA COUNTY of _____.</p> <p>Sworn to (or affirmed) and subscribed before me by means of physical present or online notarization, this _____ day of _____, 202_, by _____ / _____</p> <p>Printed Name (<b>Owner</b>)      Signature</p> <p>----- Signature and Stamp of Notary Public</p> <p>Personally known or produced identification: <small>Select</small></p> <p>Type of identification</p>	<p>STATE of FLORIDA COUNTY of _____.</p> <p>Sworn to (or affirmed) and subscribed before me by means of physical present or online notarization, this _____ day of _____, 202_, by _____ / _____</p> <p>Printed Name (<b>Agent</b>)      Signature</p> <p>----- Signature and Stamp of Notary Public</p> <p>Personally known or produced identification: <small>Select</small></p> <p>Type of identification</p>
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\* If the applicant/owner is a corporation, trust, LLC, Professional Association or similar type of arrangement, please provide documentation from the corporation, trust, etc., indicating that you have the ability to authorize the application.



# Application for Special Use 1 Alcoholic Beverages (AB1)



Development & Growth Management  
Development Coordination  
2555 E Hanna Avenue  
Tampa, FL 33610  
(813) 274-3100

**LEGAL DESCRIPTION (use separate sheet if  
needed) MUST BE TYPED -- DO NOT ABBREVIATE:**

Surveyor's  
Name: \_\_\_\_\_

State Certificate #:  
State of Florida \_\_\_\_\_

Date & Seal: \_\_\_\_\_



# Application for Special Use 1 Alcoholic Beverages (AB1)

"Cut-Out" Legal

Development & Growth Management  
2555 E Hanna Avenue  
Tampa, FL 33610  
(813) 274-3100



**LEGAL DESCRIPTION (use separate sheet if needed)**  
**MUST BE TYPED --DO NOT ABBREVIATE:**

[Empty box for legal description]

Surveyor's Name: \_\_\_\_\_ State Certificate #: \_\_\_\_\_ Date & Seal: \_\_\_\_\_  
State of Florida

### DGM/Right-of-Way Section

Legal Description is correct & complete: \_\_\_\_\_ Atlas Page: \_\_\_\_\_  
Approved by (ROWStaff): \_\_\_\_\_ Date of approval: \_\_\_\_\_



# Application for Special Use 1 Alcoholic Beverage (AB1)

Development & Growth Management  
2555 E Hanna Avenue  
Tampa, FL 33610  
(813) 274-3100

**ALCOHOLIC BEVERAGE  
MEASUREMENT FORM -  
ONLY FOR PROPERTIES  
ZONED OP-1**



Applicant's Name: \_\_\_\_\_

Parcel Address (List all): \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Proposed Special Use: \_\_\_\_\_

Requested AB Class: \_\_\_\_\_

1. Are any waivers needed for this application? \_\_\_\_\_ 1a. State the need for the waiver: \_\_\_\_\_

2. Does the establishment have any outdoor seating? \_\_\_\_\_ 2a. If yes, how many seats are located outside? \_\_\_\_\_

\_\_\_\_\_ 2b. If yes, how many seats are located inside? \_\_\_\_\_

3. If there is both inside and outside seating, are outside and inside areas contiguous / bordering each other? \_\_\_\_\_

4. Is the subject site within 250' of a single-family residential use, place of religious assembly or an elementary, middle or secondary school?

\*\*List in text box below by name, address & distance from subject parcel\*\* (Enter Yes or No here)

Surveyor's Name: \_\_\_\_\_ State Cert. # (State of FL): \_\_\_\_\_ Date & Seal: \_\_\_\_\_



# Application for Special Use-1 Alcoholic Beverage (AB1)

Development and Growth Management  
Development Coordination  
2555 E Hanna Avenue  
Tampa, FL 33610  
(813) 274-3100



## Transportation Management Form

*Beginning February 1, 1990, the City of Tampa began to implement the concurrency provisions of the State Growth Management Act. This form is to be utilized to monitor traffic volumes generated by development. Please complete the following information. Any application for a development permit will require this form to be completed and submitted to Development and Growth Management.*

Current Use(s) of Land: \_\_\_\_\_

Proposed Special Use: \_\_\_\_\_

Structure Size or # of Units: \_\_\_\_\_

Structure Size or # of Units: \_\_\_\_\_

### CERTIFICATION OF COMPLIANCE WITH THE SPECIAL USE CRITERIA

By signing the "AFFIDAVIT TO APPLY FOR A ZONING CODE RELATED APPLICATION and AUTHORIZED AGENT FOR AN APPLICATION TO THE CITY OF TAMPA" I hereby state the following is true and correct

"That I have read the conditions in the Zoning code, Chapter 27, which must be met by this Special Use Application and do hereby provide the following documentation that this property meets the requirements:"

List Documentation: \_\_\_\_\_

"That have read the conditions in the Zoning code, Chapter 27, which must be met by this Special Use Application and do hereby request a waiver or variance to the following conditions for the following reasons "

(Use additional pages if necessary): \_\_\_\_\_



## **SPECIAL USE-1 ALCOHOLIC BEVERAGES (AB1) APPLICATION SITE PLAN REQUIREMENTS**

An application for Special Use 1 Alcoholic Beverage Sales (AB1) requires submittal of a Site Plan. The Site Plan must be drawn to-scale, i.e., to an engineer's scale with a ratio such as 1" = 10'.

The AB1 request will be evaluated based on compliance with the Transportation Division and the Tampa Comprehensive Plan in addition to the appropriateness of the site plan based on the requirements of Chapter 27 and other applicable land development regulations.

If the Zoning Administrator or designee grants the AB1 request, the Site Plan will be binding upon the owner and his/her successors in title. Development and use of the property shall only occur in strict conformance with the approved site plan. Any proposed changes to the approved site plan are subject to the approval of the Zoning Administrator, through the Special Use 1 AB1 process.

The developer remains responsible for compliance with all applicable City Codes at time of building permitting.

### **REQUIRED GENERAL INFORMATION**

- North Arrow, legend, scale.
- Drawing size (minimum allowed): 24" x 36" (alternate sizes may be permitted by the Zoning Administrator).
- Total acreage of the site.
- Total alcoholic beverage (AB) sales area.
- Total floor area ratio and total building square footage, if applicable.
- Business hours of operation, if applicable.
- AB classification, as defined in Section 27-43.
- Use with which the AB sales is associated/incidental.
- Statement of commitment to comply with all applicable City of Tampa development regulations.

### **EXISTING CONDITIONS**

- Approximate location, size, and type of existing trees, water bodies, vegetation and other significant natural features.
- Name, location and width of all existing street and alley rights-of-way, within or adjacent to the site.
- Existing type and width of pavement on all streets and alley within or adjacent to the site.
- Location, width and use of all easements within or adjacent to the site.





## **PROPOSED IMPROVEMENTS**

*\*\*For those permit requests that involve change of use, building additions, increases in intensity, aggregation of lands, change in alcoholic beverage locations or sales area, etc., the site plan shall provide the following:*

- Location, size, height, and use of all proposed buildings.
- Proposed building setbacks.
- Total floor area by proposed use and total AB Sales Area listed by "indoor" and "outdoor" and by floor, if sales to be located on multiple floors.
- Location and purpose of all areas dedicated or reserved to the public or to the inhabitants of the project.
- Location and dimensions of proposed parking and service areas, including typical parking space dimensions.
- Proposed circulation pattern, including access to adjacent streets and/or alleys.
- Proposed parking lot landscaping.
- Proposed buffering from adjacent residential Zoning Districts.
- Proposed location and method of Stormwater retention.
- Proposed location and screening of solid waste containers.
- Proposed location, size, and total amount of required open space, if applicable.
- Proposed location of new sidewalks and their dimension.

## **BUILDING IMPROVEMENTS**

- State of Florida Building Code definition for types of construction proposed and existing (if applicable).
- Elevations of all side of structures required for new construction; if structures are existing, current photographs may be provided in-lieu of building elevations (if applicable).

**TYPE OF S1 REQUESTED.**

(Indicate **PROPOSED AB SALES** and reason for request.)

**LOCATION  
MAP:**

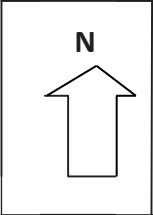
**PROPOSED IMPROVEMENTS (DRAWING):**

- Name, location, and width of existing street and alley rights-of-way, adjacent to the site.
- Width of existing pavement on all streets and alleys adjacent to the site.
- Location, width and type of all easements adjacent to the site.
- Clearly show the property boundaries of the parcel(s) involved in the special use.
- Location, size, height and use of all proposed additions and/or new buildings.
- Existing and proposed building setbacks
- Location and dimension of existing and proposed driveways, and parking areas include typical parking space.
- Existing and proposed parking lot landscaping.
- Approximate location and size of significant natural features such as trees, lakes, etc.
- Existing and proposed buffering from adjacent uses.

Show conceptual layout of proposed retention system.

**TITLE BLOCK;**

- Firm's name and address
- The site plan must be to scale. State scale on drawing.
- Show North arrow.
- Project name and location.
- Revision block.
- Drawing data.



**LEGAL DESCRIPTION:**

- Address
- Folio Number
- Square Footage

**GENERAL NOTES:**

**LEGEND:**

Case No.: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Certified Date                      Zoning Administrator

THIS EXAMPLE FOR GENERAL INFORMATION ONLY

36" MAX