



City of Venice
 401 West Venice Ave., Venice, FL 34285
 941-486-2626
 DEVELOPMENT SERVICES
FEE WAIVER / REDUCTION REQUEST

FEE WAIVER / REDUCTION REQUEST

1) Name of Individual Requesting Waiver/Reduction: Donald F. O'Connell & Skip Berg
 Mailing Address: C/O Gregory C. Roberts
341 W. Venice Ave., Venice, FL 34285
 Phone: (941) 485-2900
 E-mail: greg@k-rlaw.com

2) Name of Project & Petition No. Granada Apartments

3) Name of organization for which waiver is requested: same as above
 Mailing Address: _____
 Phone: _____
 E-mail: _____

4) Please provide a description of the project/activity/event for which a fee waiver is being requested on a separate sheet of paper. Please include the type of project/activity/event, the number of individuals who will participate or be served, etc.

5) Please indicate if this is a one-time or annual event:
 One time Annual

6) Type and amount of fee waiver(s) requested. Please list all fees you are requesting to be waived in conjunction with this project/activity/event:

Dept. Assessing Fee	Type of Fee	Amount of Fee
(site and development plan)	filing fee	application fee \$4,700
		review fee \$2,000

6) If your entity or organization has received a fee waiver(s) for a similar project/activity/event in the past, please list fee waivers below:

Date of Waiver	Dept. Assessing Fee	Type of Fee	Amount of Fee

7) Does the organization or entity for which the fee waiver is requested receive funding from any of the following sources? If so, please specify:

- Property Tax Sales Tax Special Assessment
 User Fees Other, please specify:

none

8) If the organization or entity receives tax funding or has the ability to assess fees, please provide an explanation and supporting documentation regarding the complete inability of the organization or entity to pay the fees which you are requesting be waived. Please attach information/documentation to this form and submit with your request for fee waiver. n/a

9) Will the organization or entity be charging an entry fee or be requesting a donation for the project/activity/event for which you are requesting a fee waiver? If so, please provide an explanation and supporting documentation detailing why the fees to be waived cannot be recovered through the entry fee. Please attach information/documentation to this form and submit with your request for a fee waiver.

n/a

Authorized Signature



Title

EO-EM

Date

3/13/15

SUBMIT TO:
Planning & Zoning Division
City of Venice
401 W. Venice Avenue
Venice, FL 34285