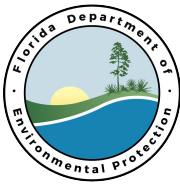

APPLICATION FOR THE USE OF STATE OWNED UPLANDS

BOARD OF TRUSTEES OF THE INTERNAL IMPROVEMENT TRUST FUND OF THE STATE OF FLORIDA

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION



Instructions and general guidance for completing this application:

**Please be advised that the information requested herein, is to provide DEP the necessary information to complete the requested authorization.*

This application is comprised of two (2) separate sections that are outlined and described as follows:

Section 1 – General Information

This section is used to indicate what type of upland authorization is requested. It is also used for contact information relative to the applicant and/or their representative. In addition, some general property information should be entered.

Section 2 – Other Specific Information

This part requests specific information relative to the type of upland authorization requested.

What Section(s) or Part(s) must be completed?

The table below depicts the applicable section(s) or part(s) that must be completed before submitting the application:

Type of Authorization Requested	Section(s) or Part(s) to be completed					
	Section 1	Section 2				
		Part A	Part B	Part C	Part D	Part E
Lease	✓	✓				
Sublease	✓		✓			
Easement	✓			✓		
Use Agreement	✓				✓	
Conveyance	✓					✓
Other*	✓					

**This includes types such as Letter of Consent, Estoppel, Affidavit, etc.*

PRIOR TO COMPLETING THIS APPLICATION, PLEASE BE ADVISED THAT:

Any application to use state land which would result in significant adverse impact to state land or associated resources shall not be approved unless the applicant demonstrates there is no other alternative and proposes compensation or mitigation acceptable to the Board of Trustees pursuant to paragraph 18-2.018(2)(i), Florida Administrative Code. Any requested use of state land which has been acquired for a specific purpose, such as conservation and recreation lands, shall be consistent with the original specified purpose for acquiring such land pursuant to paragraph 18-2.018(2)(c), Florida Administrative Code.

SPECIAL NOTE TO ALL APPLICANTS: SUBMITTAL OF A COMPLETE APPLICATION SHALL NOT OPERATE TO CREATE ANY RIGHTS OR CONSTITUTE ANY GROUNDS FOR THE DEPARTMENT TO RECOMMEND APPROVAL OF ANY REQUESTED USE OF STATE LAND. THE BOARD OF TRUSTEES HAS THE AUTHORITY AND RESERVES THE RIGHT TO DENY ANY APPLICATION. ALL COSTS INCURRED BY APPLICANTS COMPLYING WITH THE REQUIREMENTS OF THIS APPLICATION SHALL BE AT THEIR OWN RISK. COSTS ASSOCIATED WITH OBTAINING AN AUTHORIZATION ARE NON-REFUNDABLE AND SHALL BE ASSUMED BY THE APPLICANT INCLUDING, BUT NOT LIMITED TO, ALL APPRAISALS, ALL SURVEYS, ALL TITLE SEARCHES, AND ALL RECORDING FEES.

Completed Applications with any and all required attachments shall be electronically submitted to Upland.Applications@dep.state.fl.us. Please be advised that applications deemed incomplete will be immediately returned to the Applicant with a request to provide any outstanding items.

If unable to send electronically, mail (1) one hard copy to the address below:

Department of Environmental Protection
Division of State Lands
Bureau of Public Land Administration
3800 Commonwealth Boulevard, MS 130
Tallahassee, Florida 32399-3000



Section 1 – General Information

REQUESTED ACTION

New
Amendment

Release
Partial Release

Assignment/Assumption

AUTHORIZATION REQUESTED

Lease
Sublease

Easement
Use Agreement

Conveyance
Other: _____

TYPE OF ENTITY REQUESTING AUTHORIZATION

State Agency
Federal, Regional or Local Agency
Private – Please indicate if commercial: YES NO

Applicant Information

Legal Name of Lessee/Grantee:

Contact Name:

Title:

Address:

City:

State:

Zip:

Phone (1):

Phone (2):

Fax:

Email Address:

Billing Information (if same as above check here)

Name:

Title:

Company:

Address:

City:

State:

Zip:

Phone (1):

Phone (2):

Fax:

Email:

Representative Information: (Only complete if someone will be handling this transaction on your behalf)

Name:

Title:

Company:

Address:

City:

State:

Zip:

Phone (1):

Phone (2):

Fax:

Email Address:

Management Plan or Land Use Plan Contact Information (for Leases/Subleases only)

Name:

Title:

Phone (1):

Phone (2):

Fax:

Email Address:



Section 1 – General Information (cont'd)

Estimated construction commencement date (if applicable): _____

Property Information		
County:	Property Appraiser's Parcel ID Number:	
Section:	Township	Range:
Approximate Acres:		
Zoning Designation:		
Location Address:		
City	State:	Zip

Descriptive Narrative describing the intended use of the property. Narrative shall include the following:

**Narrative can be attached as a separate page(s).*

- a) The requested term, which shall not be greater than is necessary to provide for the reasonable use of the state land and shall not be greater than the parent lease term.*
- b) The need for the proposed use of state lands and written evidence that all other alternatives to the use of state lands have been denied.*
- c) Projected revenue to be generated from the use of state lands.*
- d) Whether the intended use is public or private and the extent of public access for such use.*
- e) A statement describing the public benefits that will occur as a result of the proposed use of state lands.*

Section 1 – General Information (cont'd)

Required Attachments

The following must be completed and attached for all types of authorization requests:

- _____ A recent aerial photograph with the boundaries of the proposed project.
- _____ A county tax map identifying the parcel(s).
- _____ A letter from the applicable local planning agency stating that the proposed use of state lands is consistent with the local government comprehensive plan.
- _____ Non-refundable \$300 application fee per 18-2.019(6), F.A.C. *(does not apply to State/Federal agencies)*
- _____ A certified survey* or sketch of description**, which contains the boundaries, legal description(s), and acreage of the property.
 - *The Department, at its discretion and if deemed necessary, can require a boundary survey for the action requested.*
 - **If the applicant chooses to submit a sketch of description it must include a note of what field methods were used to complete the sketch.*



Section 2 – Other Specific Information

A) Leases:

Parent Lease number (if existing): _____

_____ A statement describing the public benefits that will occur as a result of the proposed lease; how the lease will impact local resources and the general public; and how the proposed lease of state land will not be contrary to the public interest.

_____ A written statement from the managing agency agreeing to lease the state-owned parcel(s).

_____ For Leases subject to Section 253.0341(7), F.S., provide a business plan with the pertinent information required by Statute.

Any **Private entity** applying for a lease, must also include:

_____ A written commitment to pay a lease fee based on the appraised market value of the proposed lease.

_____ Names and addresses, as shown on the latest county tax assessment roll, of all property owners lying within a 500-foot radius of the state land proposed for lease, certified by the county property appraiser.

Any **Local Governments** applying for a lease, must also include:

_____ A formal resolution adopted by the Board of County/City Commissioners requesting the proposed lease.

If applying for a **Full Release** or **Partial Release** of Lease, please complete the items below:

Are there any subleases, sub-sub leases, etc. within the area requesting to be released? YES NO

If so, has notification of the intent to release been provided? YES NO

_____ A written statement confirming that Lessee understands the release will not be executed until the property is leased or sold to another entity. Lessee will remain under lease and will continue to be responsible for the maintenance and upkeep of the property until the release is executed by the Board of Trustee.

B) Subleases:

Sublease number of existing sublease (if applicable): _____

Parent Lease number (if applicable): _____

_____ A written statement from the managing agency approving the proposed action, along with a statement describing how the sublease conforms to the management plan or land use plan when the sublease application involves state land that is under lease.

Any **Private entity** applying for a sublease, must also include:

_____ A written commitment to pay a sublease fee based on one of the following: (1) appraised market value, (2) negotiated value or (3) competitive bid.

Any **Local Governments** applying for a sublease, must also include:

_____ A formal resolution adopted by the Board of County/City Commissioners requesting the proposed sublease.

If applying for a **Full Release** or **Partial Release** of Sublease, please complete the items below:

Are there any sub-sub leases, etc. within the area requesting to be released? YES NO

If so, has notification of the intent to release been provided? YES NO

_____ A written statement confirming that Lessee understands the release will not be executed until the property is leased or sold to another entity. Lessee will remain under lease and will continue to be responsible for the maintenance and upkeep of the property until the release is executed by the Board of Trustee.



C) Easements

**Applicants applying for an easement across state land which is managed for the conservation and protection of natural resources shall be required to provide net positive benefit as defined in subsection 18-2.017(38), Florida Administrative Code, if the proposed easement is approved.*

Parent Lease number (if applicable): _____

_____ A written statement from the managing agency approving the proposed action, along with a statement describing how the proposed easement conforms to the management plan or land use plan (when the easement application involves state land which is under lease or sublease.

Any **Private entity** applying for a private Easement, must also include:

_____ The applicable application fee per 18-2.019(6), F.A.C.

_____ A written commitment to pay an easement fee based on the appraised market value of the proposed easement.

Any **Local Governments** applying for an Easement, must also include:

_____ A formal resolution adopted by the Board of County/City Commissioners requesting the proposed easement.

D) Use Agreements

Parent Lease number (if applicable): _____

Please indicate what type of use agreement is requested:

Well-Monitoring

Beach (Re)Nourishment

Geophysical

Other: _____

_____ A written statement from the managing agency approving the proposed action, along with a statement describing how the proposed use agreement conforms with the management plan or land use plan when the use agreement application involves state land which is under lease or sublease.

E) Conveyances

_____ Release of Deed Restriction(s)

_____ Modification of Deed Restriction(s)

_____ Reverter Deeds

_____ DACS Conveyance (DSL-5) Pursuant to s. 253.025(16)(a), F.S.

