# APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES

**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720 www.keywestcity.com**

***Please read this Application thoroughly before submitting***

This Application involves a transfer of transient units and/or licenses from one location (Sender Site) to another (Receiver Site). Multiple Sender or Receiver Sites require **SEPARATE** Applications for each Site.

It is strongly recommended to schedule a Pre-Application Meeting with Planning Staff to discuss the project prior to the submission of this Application.

The owner(s) of the Sender Site must sign and have notarized the "Signature Page and Verification Form for Sender Site". Also, the owner(s) of the Receiver Site must sign the "Signature Page and Verification Form for Receiver Site" in the presence of a Notary Public. If this Application is presented by an agent on behalf of the owners, the owner(s) of the Sender Site must sign and notarize the "Agency Authorization Form for Owner of Sender Site" and the owner(s) of the Receiver Site must sign and notarize the "Agency Authorization Form for Owner of Receiver Site". If a corporate officer is signing any document, provide the corporate minutes or resolution showing the officer's authority along with the current corporate status check.

This Application and all required attachments must be submitted to the City Planning Department at 604 Simonton Street, Key West Florida. The Application will be reviewed by Staff and scheduled for a Development Review Committee (DRC) meeting and subsequent Planning Board meeting ONLY after the submission of complete applications and all supporting documentation, plans and appropriate processing fees by the appropriate deadline. Please call the Planning Department for application deadlines and meeting dates for the DRC and Planning Board. The applicant and/or agent should be present at the scheduled DRC meeting **AND MUST** be present at the Planning Board meeting.

The application process for a Transient unit and/or License Transfer is:

(1) Suggested Pre-Application Meeting;
(2) Submission of Application Material;
(3) Development Review Committee (DRC);
(4) Revise Plans if Needed; Submit Additional Applications and Plans;
(5) Planning Board;
(6) Rendering to the Florida Department of Community Affairs (DCA)

A thirty (30) calendar-day local appeal period **AND** a forty-five (45) calendar-day DCA appeal period for all approved Resolutions pertaining to this Application **MUST** be provided.

Copies required:

- Original Application
- 2 Signed and sealed copies of surveys (if survey is larger than 11" x 17", 18 copies will need to be provided, 2 of which need to be signed and sealed)
- Electronic version of any plans and/or surveys

**APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES**
**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720 www.keywestcity.com**

The Application package **MUST** include**:**

1A. Sender Site:

1. Current survey
2. Current floor plans and site plan
3. Copies of current occupational license(s) for transient rental use
   OR Letter from City Licensing Official verifying number of licenses and date
4. Copy of Monroe County Property Record Card (PRC)
5. Copy of last recorded deed to show ownership as listed on application
6. If property is mortgaged, a letter from the mortgagee consenting to the transfer of the transient licenses and the proposed disposition of the property
7. Proposed site plan if changed for future use
8. Proposed floor plans if changed for future use
9. Detailed description of how use of transient rental units will be extinguished.
10. Other as determined by Staff at Pre-Application Meeting _____

1B. Receiver Site:

1. Current survey
2. Current floor plans and site plan
3. Copies of current occupational license(s) for transient rental use
   OR Letter from City Licensing Official verifying number of licenses and date
4. Copy of Monroe County Property Record Card (PRC)
5. Copy of last recorded warranty deed to show ownership as listed on application
6. If property is mortgaged, a letter from the mortgagee consenting to the transfer of the transient licenses and the proposed disposition of the property
7. Proposed site plan if changed for future use
8. Proposed floor plans if changed for future use
9. Other as determined by Staff at Pre-Application Meeting _____

<u>Additional copies of the Application Package will be required at a later date for the Planning Board and possibly later steps.</u>

2. Three (3) separate fees payable to the City of Key West. The name, address, driver's license number and date of birth of the check writer must be on the back of the check:

**$2,000.00** Application Fee
**$50.00** Fire Department Review Fee
**$100.00** Advertising and Noticing Fee

# APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES

**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720**
**www.keywestcity.com**

## I. CONTACT INFORMATION

**Owner(s)**

Sender Site:

Name:

Receiver Site:

Name:

**Applicant:**

Name:
Address:
Phone:
Email:

**Agent (Notarized Agent Authorization Form MUST be submitted):**

Name:
Address:
Phone:
Email:

**APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES**
**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720**
**www.keywestcity.com**

## II. PROPERTY INFORMATION

**Sender Site:**

Address of property (Business name if applicable):

RE Number:

Zoning district:

Current use:

Number of existing transient and/or residential units:

Size of unit(s)

Number of existing city transient rental licenses:

What is being removed from the sender site?

What are your plans for the sender site?

Are there easements, deed restrictions or other encumbrances on the Property?
If Yes, describe and attach relevant documents.

Are there any code violations on the Property?
If Yes, describe and attach relevant documents.

**APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES**
**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720**
**www.keywestcity.com**

**Receiver Site:**

Address of property (Business name if applicable):

RE Number:

Zoning district:

Current use:

Number of existing transient and/or residential units:

Size of unit(s)

Number of existing city transient rental licenses:

Existing non-residential floor area (expressed in square feet):

What is being transferred to the receiver site?

What are your plans for the receiver site?

Are there easements, deed restrictions or other encumbrances on the Property?
If Yes, describe and attach relevant documents.

Are there any code violations on the Property?
If Yes, describe and attach relevant documents.

**APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES**
**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720**
**www.keywestcity.com**

## III. CURRENT OWNER INFORMATION

**Sender Site**

Individual

Name:

Address:

Phone:

Email:

Fax:

Corporations

Corporate Name:

State/Country of Incorporation:

Registered to conduct business in Florida?

Names of Officers and Designations:

Partnerships

Partnership Name:

State of Registration:

General Partner with Authority to bind Partnership:

Corporation & Partnerships

Name of Authorized Contact Person:

Address of Contact Person:

Phone:

Email

Fax:

*Corporation or Partnership representatives **MUST** provide proof of legal right to make property commitments*

**APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES**
**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720**
**www.keywestcity.com**

**Receiver Site**

Individual

Name:

Address:

Phone:

Email:

Fax:

Corporations

Corporate Name:

State/Country of Incorporation:

Registered to conduct business in Florida?

Names of Officers and Designations:

Partnerships

Partnership Name:

State of Registration:

General Partner with Authority to bind Partnership:

Corporation & Partnerships

Name of Authorized Contact Person:

Address of Contact Person:

Phone:

Email

Fax:

*Corporation or Partnership representatives **MUST** provide proof of legal right to make property commitments*

**APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES**
**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720**
**www.keywestcity.com**

**Signature Page and Verification Form for Sender Site**

I (We), _____, being duly sworn, depose and say

Name of Owner(s) or Agent

that I am the (check one) _____ Owner(s) or Authorized Agent_____ of owner(s) of the real property which is the subject matter of this Application and located at _____, Key West Florida and having RE #_____. All of the answers to the above questions, drawings, plans and any other attached data to this Application are true and correct to the best of my knowledge and belief and that if not true or correct, are grounds for revocation of any action reliant on said information.

_____ _____
Signature of Owner/Authorized Agent Date

_____ _____
Print Name Designation

Subscribed and sworn to (or affirmed) before me on this day _____of _____ 20___ by _____. He/She is personally known to me OR has presented _____as identification.

_____
Signature and Seal of Notary Public

_____
Name of Acknowledger typed, printed or stamped

_____
Commission Number and Expiration Date

**APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES**
**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720**
**www.keywestcity.com**

**Signature Page and Verification Form for Receiver Site**

I (We), _____, being duly sworn, depose and say

Name of Owner(s) or Agent

that I am the (check one) _____ Owner(s) or Authorized Agent_____ of owner(s) of the real property which is the subject matter of this Application and located at _____, Key West Florida and having RE #_____. All of the answers to the above questions, drawings, plans and any other attached data to this Application are true and correct to the best of my knowledge and belief and that if not true or correct, are grounds for revocation of any action reliant on said information.

_____ _____
Signature of Owner/Authorized Agent Date

_____ _____
Print Name Designation

Subscribed and sworn to (or affirmed) before me on this day _____of _____ 20___ by _____. He/She is personally known to me OR has presented _____as identification.

_____
Signature and Seal of Notary Public

_____
Name of Acknowledger typed, printed or stamped

_____
Commission Number and Expiration Date

**APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES**
**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720**
**www.keywestcity.com**

**Agency Authorization Form for Owner of Sender Site**

This form **MUST** be completed if someone other than the property owner(s) is acting on behalf of the owner(s) for purposes of processing this application.

I (We), _____, owner(s) of property located at

_____, Key West, Florida and having

RE#_____, hereby authorize:

_____, of _____,
Name of Agent  Name and Address of Company or Address of Agent

to represent me/us and act as agent in all matters regarding the processing of this application for the:
"***Transfer of Transient Units and/or Licenses***"

_____  _____
Signature of Owner  Date

_____  _____
Print Name  Designation

Subscribed and sworn to (or affirmed) before me on this day _____of _____ 20___ by _____. He/She is personally known to me OR has presented _____as identification.

_____
Notary's Signature and Seal

_____
Name of Acknowledger typed, printed or stamped

_____
Commission Number and Expiration Date

**APPLICATION FOR TRANSFER OF TRANSIENT UNITS AND/OR LICENSES**
**City of Key West Planning Department**
**604 Simonton Street, Key West, FL 33040**
**305.809.3720**
**www.keywestcity.com**

**Agency Authorization Form for Owner of Receiver Site**

This form **MUST** be completed if someone other than the property owner(s) is acting on behalf of the owner(s) for purposes of processing this application.

I (We), _____, owner(s) of property located at

_____, Key West, Florida and having

RE#_____, hereby authorize:

_____, of _____,
Name of Agent  Name and Address of Company or Address of Agent

to represent me/us and act as agent in all matters regarding the processing of this application for the:
"***Transfer of Transient Units and/or Licenses***"

_____  _____
Signature of Owner  Date

_____  _____
Print Name  Designation

Subscribed and sworn to (or affirmed) before me on this day _____of _____ 20___ by _____. He/She is personally known to me OR has presented _____as identification.

_____
Notary's Signature and Seal

_____
Name of Acknowledger typed, printed or stamped

_____
Commission Number and Expiration Date