



School Capacity Availability Determination (SCAD) Application

At least 30 days prior to seeking approval from county/local government, scan and email a completed application to joyce.cai@palmbeachschools.org.

A determination will be provided within twenty (20) days of receipt of a complete application. A determination is not transferable and is valid for one year from the date of issuance. Once a Development Order (DO) is issued, the SCAD determination shall be valid for the life of the DO.

Select type(s) of application:

- Future Land Use Atlas (FLUA) Amendment Rezoning Development Order (D.O.) or Amendment to D.O. No Impact

Application Review Fee(s):

- For each type of application - \$200.00 for 20 units & more or \$100 for under 20 units.
- The SCAD review fee is non-refundable and shall be paid online through the District's SchoolCashOnline at <https://palmbeach.schoolcashonline.com/>

PART I. PROJECT INFORMATION

Project Name		Municipality	
Property Control Number(s)			SAC #(s)
Property Address		City	Zip Code
General Location			Property Acreage

Complete the following table(s). Refer to the Sufficiency Checklist and provide all the required documents. For more info, go to <http://l.sdpbc.net/xiq5i>

For Future Land Use Atlas (FLUA) Amendment

CURRENT DESIGNATION		PROPOSED DESIGNATION	
Existing use of land		Proposed use of land	
Current FLUA designation		Proposed FLUA designation	
Maximum # of units permitted		Maximum # of units permitted	

For Rezoning

CURRENT DESIGNATION		PROPOSED DESIGNATION	
Existing use of land		Proposed use of land	
Current zoning designation		Proposed zoning designation	
Maximum # of units permitted		Maximum # of units permitted	

For Development Order (D.O.) or Amendment to D.O.

PROJECT INFORMATION		UNIT TYPE	NUMBER OF UNITS
Total # of units proposed		Single-Family	
# of stories for each building		Multi-Family (other than apts.)	
Are there previous approval(s)*		Apartments (3 stories or less)	
Will the project be phased?***		High Rise (4 stories or more)	
		Age restricted (adults only)**	

* If applicable, please attach previous approval letter(s).

** An executed Restrictive Covenant is required for age restricted communities.

*** If applicable, please attach a Phasing Plan showing the number and type of units to receive certificate of occupancy yearly.

Owner / Agent Information

Owner's Name		Owner's Email		Owner's Phone #	
Agent's Name		Agent's Email		Agent's Phone #	
Mailing Address			City	State	Zip Code

I hereby certify the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge.

Owner or Owner's Agent Signature

Date



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
 Planning and Intergovernmental Relations
School Capacity Availability Determination (SCAD)
 Application *continued*

Project Name	Owner's Name	Agent's Name
--------------	--------------	--------------

PART II. LOCAL GOVERNMENT REVIEW

Date Application Filed	Petition # - FLUA	Petition # - Rezoning	Petition # - D.O.	Petition # - No Impact
Reviewed By (Print Name)		Reviewed By Email		

_____ *Government Representative Signature*

_____ *Date*

PART III. SCHOOL DISTRICT REVIEW

Case Type	Case Number	Date Application Received	Date Application Completed	Date SCAD Letter Issued
FLUA				
Rezoning				
D.O.				
No Impact				

Additional Information

SCAD Fees Paid

Amount Paid \$ _____ Date Paid _____ SchoolCashOnline Receipt # _____

Notes

The School District of Palm Beach County
 Planning and Intergovernmental Relations
 3661 Interstate Park Rd North, Suite 200
 Riviera Beach, FL 33404

joyce.cai@palmbeachschools.org
 561-882-1941