Sarasota County

Planning and Development Services
Zoning Division

2026 Board of Zoning Appeals
Appeal Application Packet

PLANNING & DEVELOPMENT SERVICES, Zoning Administration • 1001 Sarasota Center Boulevard, Sarasota, FL 34240
Tel 941-861-6161 • Fax 941-861-6431

Board of Zoning Appeals Hearing Application Instructions

(Do not include these instructions as part of your packet for the Board.)

APPEAL OF WRITTEN DETERMINATION

Section 124-47. – Administrative Appeal Review Procedure, Sarasota County Unified Development Code (UDC)

(b) ***Applicability***. A written determination of the Administrator made under the provisions of this UDC shall be final, provided that the owner or applicant may, within 30 days of the determination, appeal to the Board of Zoning Appeals or Board, as applicable, for relief. The appeal request shall be in writing and must include a full explanation of the error committed by the Administrator in the interpretation or application of this UDC, along with the filing fee, all documents supporting the appeal, and any other pertinent information required by the Administrator as part of the appeal form.

(1) ***Appeals to the Board of Zoning Appeals*** Determinations appealable to the Board of Zoning Appeals include Written Interpretations issued by the Administrator on: Articles 6, 7, 8, 10, 11, 15 or 17 of this UDC; zoning district boundaries; whether an unspecified use falls within a use classification or use group allowed in a district; or a stipulation associated with a Variance granted by the Board of Zoning Appeals, except for those involving property within the Myakka River Protection Zone which shall be heard and decided on by the Board.

APPLICATION PROCESS

Completed applications, all required documents (see list below) and the application fee must be submitted to Zoning Administration in accordance with the deadline schedule found on page three of these instructions. Appeals to written interpretations must be submitted no later than 30 calendar days from the date of the rendered interpretation (Article 5, Section 124-45(d)(1)(a), UDC) and will be scheduled for the next available meeting.

REQUIRED DOCUMENTS

In order to have a complete application, please submit an online application in Accela and ten (10) paper copies of the following documents to Sarasota County Zoning Administration, 1001 Sarasota Center Boulevard, Sarasota, FL 34240.

1. Application (minus the instructions)
2. Zoning Determination Letter being appealed
3. Any pertinent information in support of your request,

FEES

Fees are due at the time of application submittal.

1. Administrative Appeal: $1,000.00

Board of Zoning Appeals
APPLICATION DEADLINES FOR 2026

Meeting Date	Application Deadline	Post Sign & Mail Notices Deadline
January 12, 2026	November 26, 2025	December 23, 2025
February 9, 2026	December 23, 2025	January 22, 2026
March 9, 2026	January 23, 2026	February 19, 2026
April 13, 2026	February 27, 2026	March 26, 2026
May 11, 2026	March 27, 2026	April 23, 2026
June 8, 2026	April 24, 2026	May 21, 2026
July 13, 2026	May 29, 2026	June 25, 2026
August 10, 2026	June 26, 2026	July 23, 2026
September 14, 2026	July 30, 2026	August 27, 2026
October 12, 2026	August 28, 2026	September 24, 2026
November 9, 2026	September 25, 2026	October 22, 2026
December 14, 2026	October 30, 2026	November 25, 2026

Board of Zoning Appeals Hearing Application

Hearing Date: _____ Date Received: _____

Property Address: _____

Property Identification No.: _____ Zoning District: _____

Property Owner: _____ Phone Number: _____

Property Owner Email: _____

Property Owner Address: _____

Agent: _____ Phone Number: _____

Agent Email: _____

Agent Address: _____

Are there building permits associated with this application? _____ If yes, permit # _____

Is there pending Code Enforcement action? _____ If yes, case # _____

Application Type: (check one)

_____ Administrative Appeal

Record Number being appeals (ZON-VERIFY-___-_____)

State Request for Appeal: _____

_____

_____

_____

_____

DISCLOSURE (check all that apply per Sarasota County Charter)

_____ Applicant is a land trust (name beneficiaries on separate page).

_____ Applicant is an owner (indicate exactly as recorded and list all other owners on separate page).

_____ Applicant is a corporation other than a public corporation (name officers and majority stockholders, including addresses and phone numbers on separate page).

_____ Applicant is a partnership, limited partnership or other business entity name (list principals, including addresses and phone numbers on a separate page).

_____ Applicant is a lessee (attach copy of lease and indicate actual owners if not indicated on lease).

_____ Applicant is a contract purchaser (attach copy of contract and indicate actual owners, including addresses and phone numbers on separate page).

AFFIDAVIT FOR APPEAL REQUEST

I (we), being first duly sworn, depose and say that the information contained in and attached to this application are honest and true to the best of my (our) knowledge and belief.

I (we) understand that this application must be completed and accurate before a hearing can be advertised. I (we) further permit the noted applicant/representative to act on my (our) behalf in any matter regarding this petition.

_____ _____
Owner's Signature Print Name

_____
Identification Provided

_____ _____
Owner's Signature Print Name

_____
Identification Provided

_____ _____
Representative's Signature Print Name

_____
Identification Provided

STATE OF FLORIDA
COUNTY OF SARASOTA

Sworn to and subscribed before me this _____day of _____, 20___.

_____ _____
(Official Notary Signature & Seal) Commission Expiration Date