



COLLIER COUNTY GOVERNMENT  
GROWTH MANAGEMENT DEPARTMENT  
[www.colliergov.net](http://www.colliergov.net)

2800 NORTH HORSESHOE DRIVE  
NAPLES, FLORIDA 34104  
(239) 252-2400 FAX: (239) 252-6358

### INSUBSTANTIAL CHANGE TO A PUD (PDI)

LDC subsection 10.02.13 E & Code of Laws section 2-83 – 2-90  
Ch. 3 G.3 of the Administrative Code

Pursuant to LDC subsection 10.02.13 E.2, a PUD insubstantial change includes any change that is not considered a substantial or a minor change. A PUD insubstantial change to an approved PUD ordinance shall be based upon an evaluation of LDC subsection 10.02.13 E.1 and shall require the review and approval of the Hearing Examiner. The Hearing Examiner's approval shall be based on the findings and criteria used for the original application.

PETITION NO  
PROJECT NAME  
DATE PROCESSED

*To be completed by staff*

### APPLICANT CONTACT INFORMATION

Name of Applicant(s): St. Katherine's Greek Orthodox Church, Inc.  
Address: 7100 Airport Road North city: Naples State: FL ZIP: 34109  
Telephone: 239-591-3430 Cell: N/A Fax: N/A  
E-Mail Address: hathan@cyklawfirm.com

Name of Agent: Robert J. Mulhere, FAICP, Vice President, Planning Services  
Folio #: 00235480000 Section: 1 Twp: 49S Range: 25E  
Firm: Hole Montes, Inc.  
Address: 950 Encore Way city: Naples State: FL ZIP: 34110  
Telephone: 239-254-2000 Cell: N/A Fax: 239-254-2099  
E-Mail Address: bobmulhere@hmeng.com



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**DISCLOSURE OF INTEREST INFORMATION**

Is the applicant the owner of the subject property?  Yes  No

- 1. If applicant is a land trust, so indicate and name the beneficiaries below.
- 2. If applicant is corporation other than a public corporation, so indicate and name officers and major stockholders below.
- 3. If applicant is a partnership, limited partnership or other business entity, so indicate and name principals below.
- 4. If applicant is an owner, indicate exactly as recorded, and list all other owners, if any.
- 5. If applicant is a lessee, attach copy of lease, and indicate actual owners if not indicated on the lease.
- 6. If applicant is a contract purchaser, attach copy of contract, and indicate actual owner(s) name and address below: *(If space is inadequate, attach on separate page)*  
Romeo Terezi, VP; Melvin Bodnarchuk, Secretary; Dr. Vlasios Albanis, Treasurer; Michael Nichols, Treasurer; Foti John Frangakis, 2nd VP; Spero Manas, Asst. Treasurer & Dean Kacos, Asst. Treasurer

**DETAIL OF REQUEST**

On a separate sheet, attached to the application, describe the insubstantial change request. Identify how the request does not meet the PUD substantial change criteria established in LDC subsection 10.02.13 E.1.

**PROPERTY INFORMATION**

**PUD NAME:** ORANGE BLOSSOM GARDENS PUD **ORDINANCE NUMBER:** 09-67  
**FOLIO NUMBER(S):** 00235480000

Provide a legal (if PUD is recorded) or graphic description of area of amendment (this may be graphically illustrated on Amended PUD Master Plan). If applying for a portion of the PUD, provide a legal description for subject portion.

Attach on a separate sheet, a written description of the map or text change.

Does amendment comply with the Growth Management Plan?  Yes  No



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If no, please explain: \_\_\_\_\_

Has a public hearing been held on this property within the last year?  Yes  No

If yes, in whose name? \_\_\_\_\_

Has any portion of the PUD been  SOLD and/or  DEVELOPED?

Are any changes proposed for the area sold and/or developed?  Yes  No

If yes, please describe on an attached separate sheet.



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**Pre-Application Meeting and Final Submittal Requirement Checklist for:  
 PUD Insubstantial Change  
 Chapter 3 G.3 of the Administrative Code**

The following Submittal Requirement checklist is to be utilized during the Pre-Application Meeting and at time of application submittal. At final submittal, the checklist is to be completed and submitted with the application packet. Please provide the submittal items in the exact order listed below, with cover sheets attached to each section. **Incomplete submittals will not be accepted.**

REQUIREMENTS FOR REVIEW	# OF COPIES	REQUIRED	NOT REQUIRED
Completed Application (download current form from County website)	1 <del>16</del>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pre-Application Meeting notes	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Project Narrative, including a detailed description of proposed changes and why amendment is necessary	1 <del>16</del>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Detail of request	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Current Master Plan & 1 Reduced Copy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Revised Master Plan & 1 Reduced Copy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Revised Text and any exhibits	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PUD document with changes crossed through & underlined	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PUD document as revised with amended Title Page with Ordinance #	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Warranty Deed	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal Description	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Boundary survey, if boundary of original PUD is amended	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If PUD is platted, include plat book pages	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
List identifying Owner & all parties of corporation	2	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Affidavit of Authorization, signed &amp; notarized</u>	2	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Completed Addressing Checklist</u>	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of 8 ½ in. x 11 in. graphic location map of site	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Electronic copy of all documents and plans *Please advise: The Office of the Hearing Examiner requires all materials to be submitted electronically in PDF format.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>*If located in Immokalee or seeking affordable housing, include an additional set of each submittal requirement.</b>			

**ADDITIONAL REQUIREMENTS FOR THE PUBLIC HEARING PROCESS:**

- Following the completion of the review process by County Review staff, the applicant shall submit all materials electronically to the designated project manager.
- Please contact the project manager to confirm the number of additional copies required.



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**PLANNERS – INDICATE IF THE PETITION NEEDS TO BE ROUTED TO THE FOLLOWING REVIEWERS:**

<input type="checkbox"/>	School District (Residential Components): Amy Lockheart	<input type="checkbox"/>	Bayshore/Gateway Triangle Redevelopment: Executive Director
<input checked="" type="checkbox"/>	Utilities Engineering: Kris VanLengen	<input type="checkbox"/>	Parks and Recreation: Vicky Ahmad
<input type="checkbox"/>	Emergency Management: Dan Summers	<input type="checkbox"/>	Naples Airport Authority: Ted Soliday
<input type="checkbox"/>	Conservancy of SWFL: Nichole Ryan	<input type="checkbox"/>	Other:
<input type="checkbox"/>	City of Naples: Robin Singer, Planning Director	<input type="checkbox"/>	Other:

**FEE REQUIREMENTS**

- PUD Amendment Insubstantial (PDI): \$1,500.00**
  - Pre-Application Meeting: \$500.00** \$1,125
  - Estimated Legal Advertising fee for the Office of the Hearing Examiner: ~~\$925.00~~** \$1,500 (PDI)
- \$1,125 (Advert.)  
 \$ 100 (Fire Rev.)

The completed application, all required submittal materials, and fees shall be submitted to:

Growth Management Department/Planning and Regulation  
 ATTN: Business Center  
 2800 North Horseshoe Drive  
 Naples, FL 34104

\$2,725  
 \$ 500 (Credit)  
 \$2,225

Robert J. Mulhere/SCU  
 Applicant/Owner Signature  
 Agent

4-4-2017  
 Date

Robert J. Mulhere, FAICP, Vice President/Agent

Applicant/Owner Name (please print)

**AFFIDAVIT OF AUTHORIZATION**

FOR PETITION NUMBERS(S) PDI-PL-20170000524

I, JAMES KETIS (print name), as PRESIDENT (title, if applicable) of ST. KATHERINE'S GREEK ORTHODOX CHURCH, INC. (company, if applicable), swear or affirm under oath, that I am the (choose one) owner  applicant  contract purchaser  and that:

1. I have full authority to secure the approval(s) requested and to impose covenants and restrictions on the referenced property as a result of any action approved by the County in accordance with this application and the Land Development Code;
2. All answers to the questions in this application and any sketches, data or other supplementary matter attached hereto and made a part of this application are honest and true;
3. I have authorized the staff of Collier County to enter upon the property during normal working hours for the purpose of investigating and evaluating the request made through this application; and that
4. The property will be transferred, conveyed, sold or subdivided subject to the conditions and restrictions imposed by the approved action.
5. We/I authorize ROBERT J. MULHERE, FAICP, VICE PRESIDENT, PLANNING to act as our/my representative in any matters regarding this petition including 1 through 2 above.

**\*Notes:**

- If the applicant is a corporation, then it is usually executed by the corp. pres. or v. pres.
- If the applicant is a Limited Liability Company (L.L.C.) or Limited Company (L.C.), then the documents should typically be signed by the Company's "Managing Member."
- If the applicant is a partnership, then typically a partner can sign on behalf of the partnership.
- If the applicant is a limited partnership, then the general partner must sign and be identified as the "general partner" of the named partnership.
- If the applicant is a trust, then they must include the trustee's name and the words "as trustee".
- In each instance, first determine the applicant's status, e.g., individual, corporate, trust, partnership, and then use the appropriate format for that ownership.

Under penalties of perjury, I declare that I have read the foregoing Affidavit of Authorization and that the facts stated in it are true.

[Signature]

Signature

3-21-17

Date

JAMES KETIS, PRESIDENT

ST. KATHERINE'S GREEK ORTHODOX CHURCH, INC.

STATE OF FLORIDA  
COUNTY OF COLLIER

*\* St. Katherine's Greek Orthodox Church, Inc.*

The foregoing instrument was sworn to (or affirmed) and subscribed before me on March 21, 2017 (date) by James Ketis, Jr, President of \* (name of person providing oath or affirmation), as \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

STAMP/SEAL

[Signature]  
Signature of Notary Public

