



DEPARTMENT OF DEVELOPMENT SERVICES
PLANNING DIVISION

Tel. (239) 574-0776
Fax (239) 574-0591
P.O. Box 150027
Cape Coral, FL 33915-0027

Date: _____

APPLICATION FOR LOT SPLIT AND LOT COMBINATION

A lot split or combination within the City of Cape Coral may affect the ability to develop your property. Prior to the splitting or combining of any parcel(s), City approval is required. In addition to City approval, Lee County Property Appraiser requires all outstanding property taxes must be paid. All parcels must be titled the same (e.g. single, tenants in common, tenants by entirety).

Directions for Submittal

Please allow a minimum of fifteen (15) business days for approval from date of receipt.

Applicants should now go through the CSS portal to apply [CSS Production](#)

1. For **lot splits** and **lot combinations** that follow platted lot lines, submit one (1) copy of this completed application to planning@capecoral.gov
2. For actions that alter platted lot lines or involve un-platted parcels, a replat application is required in most cases. For actions that alter platted lot lines or involve un-platted parcels a Replat Application is often required. Please contact Development Services at (239) 573-3167 or via email at devservice@capecoral.gov for required documents.
3. Duplexes on sites with septic with areas of 20,000 sq. ft. or greater.
For situations where a septic tank occupies a two-lot area separate from a duplex, the applicant is required to abandon the septic tank and provide documentation that the abandonment has passed inspection with Lee County prior to the City approving a lot split application.

SELECT ONE

☐ COMBINE

☐ SPLIT

STRAP Number or Folio IDs

STRAP Number or Folio ID
List Lot Number

ATTACH ANOTHER SHEET IF MORE LINES NEEDED



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Block(s) Involved _____ Lot(s)involved(eg1,2+3,4)_____

Property Owner(s) Signature _____ Printed Name _____

Property Owner(s) Signature _____ Printed Name _____

Property Owner Information

Name: _____ Phone: _____

Address: _____ Email: _____

Please include this form and all other required materials and mail, email, or fax this information to:

Department of Services Development
PO Box 150027 Cape Coral, FL 33915-0027
Ph: (239) 574-0401
Fax: (239) 574-0591
Email: planning@capecoral.gov

Additional notes and information:

Please be advised that this request does not imply suitability or authorize development of the parcel. Please contact the Planning Division concerning questions about the development of the parcel(s). No rights are being granted by this action that is reserved to any regulatory agency. **This action does not nullify or alleviate any existing liens or encumbrances on the property. All lot split and combines require a request for address assignment through Lee County E911, EAddressing@leegov.com. If the request involves new construction, you are required to submit a survey with the site plan.**

If one of the parcels involved in the split or combination is receiving a Homestead Exemption through Lee County Property Appraiser, your exemption may be impacted.

After completion of the split or combination, will any parcel(s) be used as part of your homesteaded property?

Yes ☐ No ☐

If **No**, how will the property be used?



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I authorize the Lee County Property Appraiser to obtain information to determine eligibility for **Homestead Exemption**. I understand that under Section 196.131(2), Florida Statutes, any person who knowingly gives false information to claim Homestead Exemption is guilty of a misdemeanor of the first degree, punishable by imprisonment up to one (1) year, a fine up to \$5,000, or both.

Under penalties of perjury, I declare that I have read the foregoing affidavit and the facts in it are true. I further understand that if the Property Appraiser determines that for any year within the prior 10 years I was not entitled to receive this exemption, my property shall be subject to the taxes exempted, plus 15 percent per annum, and a penalty of 50 percent of the taxes exempted.

Signature _____

OFFICE USE ONLY		Simple Lot Split/Combination	
Reviewed by: _____		Approved _____	Unapproved _____
Signature: _____		Date: _____	