



Baker County Community Development
 360 East Shuey Avenue
 Macclenny, FL 32063
 Phone (904) 259-2403
 Fax (904) 259-5057

LARGE SCALE FUTURE LAND USE AMENDMENT TO THE COMPREHENSIVE PLAN APPLICATION

Application # _____ Date of Application _____

| | | | |
|--------------------------|-------------------|--------|--------|
| PROPERTY OWNER(S) | Name(s): | | |
| | Mailing Address: | | |
| | City: | State: | Zip: |
| | Telephone Number: | | Fax #: |
| | E-mail Address: | | |
| | | | |

| | | | |
|------------------------|-------------------|--------|--------|
| APPLICANT/AGENT | Name(s): | | |
| | Mailing Address: | | |
| | City: | State: | Zip: |
| | Telephone Number: | | Fax #: |
| | E-mail Address: | | |
| | | | |

| | |
|-----------------------------|--|
| PROPERTY DESCRIPTION | Property Address(es) |
| | Property Location(s) (briefly describe, do not use "see attached legal description") |
| | Acreage |
| | Parcel # (tax ID #) |
| | BCC District # |
| | |

OFFICIAL USE ONLY

LOCAL PLANNING AGENCY ACTION:

APPROVED _____
 * APPROVED WITH CONDITIONS _____
 DENIED _____

Signature of Chairperson _____

Date of action: _____

*Approved with conditions, see attached.

BOARD OF COMMISSIONERS ACTION:

APPROVED _____
 * APPROVED WITH CONDITIONS _____
 DENIED _____

Signature of Chairperson _____

Date of action: _____

*Approved with conditions, see attached.

I. LAND USE AMENDMENT INFORMATION

This application is a request for: (check all that apply)

_____ Future Land Use Map (FLUM) amendment to the Comprehensive Plan

_____ Large Scale (20 acres or greater)

Please complete the following section that applies. Complete both sections if submitting a land use amendment and rezoning request on the same property.

A. Current Zoning: _____

B. Future Land Use Map (FLUM) amendment:

Current Future Land Use(s): _____

Requested Future Land Use(s): _____

Current Use of Property: _____

Reason/Justification for Land Use Amendment:

II. REQUIRED ATTACHMENTS:

A. All applications (zoning and land use amendments)

_____ Legal Description: An accurate legal description of the specific property being requested for zoning or land use change. The legal description may be either lot and block or metes and bounds. A copy of the legal description must be provided in both digital (MS Word) and print format.

_____ Property Ownership Affidavit: Notarized letter(s) of the property owner's consent to amend the future land use/rezone the subject property(ies).

_____ Copy of property owner's recorded Warranty Deed.

_____ Agent Authorization (if applicable): Notarized letter(s) designating an agent to act on behalf of the property owner(s).

_____ Boundary survey of the site.

_____ Application fee(s), advertising fee(s) and other fees, as required.

_____ Other supporting data required by staff: _____

B. Future Land Use Map (FLUM) amendments (large and small scale)

Applications for amendments to the Future Land Use Map (FLUM) must include the attachments required by Section A, as well as the following additional attachments:

_____ Soils map.

_____ Natural vegetation/wildlife map.

_____ Wetlands map.

_____ Topography/floodplain map.

_____ Historical/archaeological resources map.

_____ Aquifer recharge areas map.

_____ Traffic impact study/transportation management plan: Required to be prepared by a transportation engineer to evaluate the impact of the proposed amendment on segments and intersections of the affected regional transportation network

_____ Water and sewer analysis: Describe the method that water and sewer service will be delivered to the subject property. If central water and/or sewer, please indicate the utilities to serve the site.

_____ Other supporting data required by staff: _____

III. APPLICATION CERTIFICATION

I, hereby, certify that I am the owner (or the authorized agent of the owner(s)) of the property described herein, that all answers to the questions in this application and all information contained in the material attached to and made a part of this application, are accurate and true to the best of my knowledge and belief.

Signature of Owner(s) (or Applicant/Agent
if Agent Authorization form attached)

(Date)

NOTES:

- Applications cannot be processed until all fees are paid.
- Application fees and other required fees will not be refunded if an application is denied by the Land Planning Agency and/or Board of Commissioners.
- Owner/applicant is responsible for all legal advertisement fees for required advertising, in addition to application fees and other applicable fees.
- In accordance with Baker County Land Development Regulations (LDR) § 10.02.08, a property owner shall not initiate land use and/or zoning actions affecting the same parcel of land, **more often than once every six months** from the date of initiation of the previous action.
- Pursuant to § 286.0105 of Florida Statutes, if a person decides to appeal any decision made by the Local Planning Agency or County Commission, with respect to any matter considered at such meeting or hearing, he or she will need a record of the proceedings, and that, for such purpose, he or she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based. According to the Americans with Disabilities Act, persons needing a special accomodation or an interpreter to participate in a public hearing should contact the Administration Department at (904) 259-3613, at least 48 hours prior to the time of the hearing.

PROPERTY OWNERSHIP AFFIDAVIT

Date: _____

Baker County
Planning and Zoning Department
360 E Shuey Avenue
Macclenny, FL 32063

PROPERTY DESCRIPTION:

Parcel ID: _____ Lot #: _____

Street Address: _____

I, _____
Property Owner (Please Print) Property Owner (Please Print)

hereby certify that I am the owner of the above referenced property also described in the attached legal description in connection with filing application(s) for _____ submitted to the Baker County Planning and Zoning Department.

(Owner Signature)

(Owner Signature)

STATE OF FLORIDA
COUNTY OF _____

The foregoing affidavit was sworn and subscribed before me this _____ day of _____, 20____, by _____ who is personally known to me or has produced _____ as identification.

(Notary Signature)

AGENT AUTHORIZATION

Date: _____

Baker County
Planning and Zoning Department
360 E Shuey Avenue
Macclenny, Florida 32063

PROPERTY DESCRIPTION:

Parcel ID: _____ Lot Number: _____

Street Address: _____

Property Owner: _____
(Please Print)

Property Owner: _____
(Please Print)

The undersigned, registered property owner(s) of the above noted property, do hereby authorize

_____, of _____
(Agent) (Name of firm)

to act as agent to file application(s) for the above referenced property and in connection with such authorization to file such applications, papers, documents, requests and other matters necessary for such requested change.

(Owner Signature)

(Owner Signature)

STATE OF FLORIDA
COUNTY OF _____

The foregoing affidavit was sworn and subscribed before me this _____ day of _____, 20____, by _____ who is personally known to me or has produced _____ as identification.

(Notary Signature)

Large Scale Land Use Amendment To The Comprehensive Plan

Application Fee **\$500.00**

Advertising Fee **\$500.00**

- Newspaper Ad (3 Publications LPA & BCC)
- Property Signage
- Property Owner Notices
- State Agencies

Acreage Fee (\$20 per acre) ___ x \$20 = **\$_____**

Recording Fee **\$45.50**
(\$10 for the 1st page, \$8.50 for each additional page) _____

Total Due **\$**

Property Owner Name:

Agent:

Parcel ID #:

Paid By: Check #, Date, Receipt#

PERMITS WILL NOT BE ISSUED UNTIL ALL FEES ARE PAID

TECHNICAL FEES FOR THE FOLLOWING BUT NOT LIMITED TO THEM MAY HAVE EXTRA CHARGES.

1. Attorney Option
2. State Surveyor Opinion
3. Engineer Opinion
4. Assistance from Northeast Regional Council
5. Mapping Assistance