



FOR OFFICE USE ONLY

Received Date _____
Application #: _____
Acceptance Date: _____
Review Date: SRDT _____ P & Z _____ CC _____

Small Scale Future Land Use Map Amendment Application

A. PROJECT

- 1. Project Name: LLHE INDUSTRIAL REZONE
2. Address of Subject Property: 965 LEONARD C. TAYLOR PARKWAY
3. Parcel ID Number(s): 38-06-26-016451-000-00
4. Existing Use of Property: INDUSTRIAL MANUFACTURING
5. Future Land Use Map Designation: INDUSTRIAL LAND USE MIXED USE
6. Existing Zoning Designation: CH: COMMERCIAL HIGH INTENSITY C2 GENERAL COMMERCIAL
7. Proposed Future Land Use Map Designation: INDUSTRIAL (IND)
8. Acreage (must be 50 acres or less): 15

B. APPLICANT

- 1. Applicant's Status: [] Owner (title holder) [x] Agent
2. Name of Applicant(s) or Contact Person(s): DAVID SMITH Title: MANAGER
Company (if applicable): LOUIS L. HUNTLEY ENTERPRISES, INC.
Mailing address: 1890 KINGSLEY AVE., STE 102
City: ORANGE PARK State: FL ZIP: 32073
Telephone: (904) 272-0435 e-mail: A.VAUGHN@MMSEJAX.COM
3. If the applicant is agent for the property owner*
Name of Owner (title holder): LOUIS WARD HUNTLEY
Mailing address: 1890 KINGSLEY AVE., STE. 102
City: ORANGE PARK State: FL ZIP: 32073
Telephone: (904) 631-0124 e-mail: JFFYJOE@AOL.COM

* Must provide executed Property Owner Affidavit authorizing the agent to act on behalf of the property owner.

C. ADDITIONAL INFORMATION

- 1. Is there any additional contact for sale of, or options to purchase, the subject property?
[] Yes [x] No If yes, list names of all parties involved:
If yes, is the contract/option contingent or absolute?
[] Contingent [] Absolute


D. ATTACHMENTS

1. Statement of proposed change, including a map showing the proposed Future Land Use Map change and Future Land Use Map designations on surrounding properties
2. A map showing the zoning designations on surrounding properties
3. A current aerial map (Maybe obtained from the Clay County Property Appraiser.)
4. Legal description with tax parcel number.
5. Boundary survey
6. Warranty Deed or the other proof of ownership
7. Fee.
 - a. \$750, plus
 - b. All applications are subject 10% administrative fee and must pay the cost of postage, signs, advertisements and the fee for any outside consultants.

No application shall be accepted for processing until the required application fee is paid in full by the applicant. Any fees necessary for technical review or additional reviews of the application by a consultant will be billed to the applicant at the rate of the reviewing entity. The invoice shall be paid in full prior to any action of any kind on the development application.

All attachments are required for a complete application. A completeness review of the application will be conducted within five (5) business days of receipt. If the application is determined to be incomplete, the application will be returned to the applicant.

I/We certify and acknowledge that the information contained herein is true and correct to the best of my/our knowledge:


Signature of Applicant
DAVID E. SMITH
Typed or printed name and title of applicant

Signature of Co-applicant

Typed or printed name of co-applicant

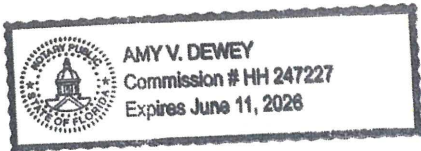
Date

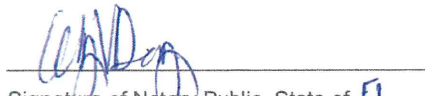
Date

State of FL County of CLAY

The foregoing application is acknowledged before me this 30TH day of MAY, 2023, by DAVID SMITH, who is/are personally known to me, or who has/have produced _____ as identification.

NOTARY SEAL




Signature of Notary Public, State of FL