



FOR OFFICE USE ONLY

P Z File # \_\_\_\_\_

Application Fee: \_\_\_\_\_

Filing Date: \_\_\_\_\_ Acceptance Date: \_\_\_\_\_

Review Date: SRDT \_\_\_\_\_ P & Z \_\_\_\_\_ CC \_\_\_\_\_

Rezoning Application

A. PROJECT

- 1. Project Name: Energy Cove Rezoning
2. Address of Subject Property: Cooks Lane
3. Parcel ID Number(s): Portion of RE#016562-000-00
4. Existing Use of Property: Vacant
5. Future Land Use Map Designation: Mixed Use
6. Existing Zoning Designation: R-3
7. Proposed Zoning Designation: M-2 J/S 4/1/2023
8. Acreage: 3.63

B. APPLICANT

- 1. Applicant's Status: [X] Agent
2. Name of Applicant(s) or Contact Person(s): Janis K. Fleet, AICP Title: President
Company (if applicable): Fleet & Associates Architects/Planners, Inc.
Mailing address: 11557 Hidden Harbor Way
City: Jacksonville State: Florida ZIP: 32223
e-mail: jfleet@fleetarchitectsplanners.net
3. If the applicant is agent for the property owner\*
Name of Owner (titleholder): Wiggins Investments of North Florida
Mailing address: 91 Branscomb Rd, Ste 17
City: Green Cove Springs State: Florida ZIP: 32043
e-mail: joe@wigginslaw.net

\* 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 [ ] 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 zoning change and zoning designations on surrounding properties
2. A current aerial map (Maybe obtained from the Clay County Property Appraiser.)
3. Plat of the property (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 \$20 per acre over 5
  - 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 7 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

\_\_\_\_\_  
Signature of Co-applicant

Janis King Fleet  
\_\_\_\_\_  
Typed or printed name and title of applicant

\_\_\_\_\_  
Typed or printed name of co-applicant

5/25/23  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

State of Florida County of Duval

The foregoing application is acknowledged before me this 25 day of May, 2023 by Janis

King Fleet, who is/are personally known to me, or who has/have produced FL DL  
as identification.

NOTARY SEAL  
Janah Mykel Reyes Manansala

Signature of Notary Public, State of Florida

