



<b>FOR OFFICE USE ONLY</b>	
Received Date	_____
Application #:	_____
Acceptance Date:	_____
Review Date: SRDT	_____ P & Z _____ CC _____

# Small Scale Future Land Use Map Amendment Application

## A. PROJECT

- Project Name: Preserve at Green Cove Springs
- Address of Subject Property: US 17 & CR 209
- Parcel ID Number(s): 38-06-26-016499-007-00 (Portion)
- Existing Use of Property: unimproved land
- Future Land Use Map Designation : Industrial (County)
- Existing Zoning Designation: Light Industrial (County)
- Proposed Future Land Use Map Designation: Mixed-Use (City)
- Acreage (must be 50 acres or less): 13.92

## B. APPLICANT

- Applicant's Status  Owner (title holder)  Agent
- Name of Applicant(s) or Contact Person(s): Ellen-Avery Smith Title: Partner  
 Company (if applicable): Rogers Towers, P.A.  
 Mailing address: 100 Whetstone Place, Suite 200  
 City: St. Augustine State: FL ZIP: 32086  
 Telephone: (904) 824-0879 e-mail: eaverysmith@rtlaw.com

- If the applicant is agent for the property owner\* Virginia S. Hall Revocable Trust, J.P. Hall Jr Second Amended and Restated Revocable Trust, CHS LLC, Lyman G. Hall  
 Name of Owner (title holder): \_\_\_\_\_  
 Mailing address: 2321 Egremont Drive  
 City: Orange Park State: FL ZIP: 32073  
 Telephone: (904) 860-8739 e-mail: virginiashall@msn.com

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

## C. ADDITIONAL INFORMATION

- 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 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:**

*Ellen Avery Smith*  
Signature of Applicant

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

Ellen Avery Smith  
Typed or printed name and title of applicant

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

3/7/22  
Date

\_\_\_\_\_  
Date

State of Florida County of St. Johns

The foregoing application is acknowledged before me this 7<sup>th</sup> day of MARCH, 2022, by Ellen Avery Smith, who is/are personally known to me, or who has/have produced \_\_\_\_\_ as identification.

NOTARY SEAL

*Vicky L. Williams*  
Signature of Notary Public, State of \_\_\_\_\_

