



**FOR OFFICE USE ONLY**

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

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

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

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

## Small Scale Future Land Use Map Amendment Application

### A. PROJECT

- Project Name: Prelude Building complex
- Address of Subject Property: 310 Orange Ave
- Parcel ID Number(s): 38-06-26-017311-000-00,
- Existing Use of Property: Vacant
- Future Land Use Map Designation: Institution and Commercial High Intensity
- Existing Zoning Designation: Gateway Corridor
- Proposed Future Land Use Map Designation: Commerical high intensity - Central Business District
- Acreage ( must be 10 acres or less): .31 ac 53,400 squarefeet

### B. APPLICANT

- Applicant's Status  Owner (title holder)  Agent
- Name of Applicant(s) or Contact Person(s): Kelly Hartwig Title: Agent  
 Company (if applicable): Cypress Management and Design  
 Mailing address: PO Box 8880  
 City: Fleming Island State: Florida ZIP: 32006  
 Telephone: ( ) 759-9576 FAX: ( ) \_\_\_\_\_ e-mail: siteopt@bellsouth.net
- If the applicant is agent for the property owner\*  
 Name of Owner (title holder): Brian and Jennifer Knight  
 Mailing address: 687 Arthur Moore Dr,  
 City: GCS State: FI ZIP: 32043  
 Telephone: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_ e-mail: \_\_\_\_\_

\* 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. Plat of the property (Maybe obtained from the Clay County Property Appraiser.)
5. Legal description with tax parcel number.
6. Boundary survey
7. Warranty Deed or the other proof of ownership
8. Fee.

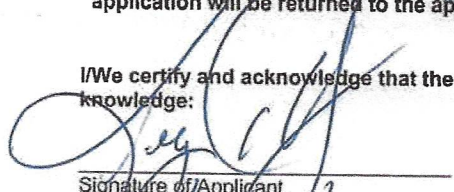
a. \$750

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 8 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

Typed or printed name and title of applicant

Typed or printed name of co-applicant

Date

9/13/2021

Date

State of FL

County of Clay

The foregoing application is acknowledged before me this 13 day of Sept, 2021 by Kelly

Hartwig, who is/are personally known to me, or who has/have produced FLDL as identification.

NOTARY SEAL



Signature of Notary Public, State of FL

