

FOR OFFICE USE ONLY	
PZFile#	
Application Fee:	
Filing Date:	_Acceptance Date:
Review Date: SRDTP &	z cc

Rezoning Application

JECT Dans a see of	Multi Familia Davida	
Project Name: Proposed	Multi-Family Develo	pment
Address of Subject Property: 130	00 Energy Cove Co	urt
Parcel ID Number(s): 38-06-	26-016562-000-00	
Existing Use of Property: Vaca	ant	
Future Land Use Map Designation	. <u>MUH</u>	
Existing Zoning Designation:	JH C-2/M-2 - Mixed	Use Highway
	Owner (title holder)	⊠Agent
		PF
Name of Applicant(s) or Contact P	erson(s):	_{Title:} P.E.
Company (if applicable): Black	Creek Engineering	, Inc
		ZIP: 32043
Telephone: (90) 759-8930	FAX: <u>()</u> e	-mail:cdgroff@bellsouth.net
3. If the applicant is agent for the property owner* Name of Owner (titleholder): B&B GCS Joint Venture, C/O John R Smith Jr		
1 Indepen	dent Drive	
City: Jacksonville	_ _{State:} Florida	32202
Telephone: ()	FAX: <u>()</u> e	-mail:jsmith@smithhulsey.com
wites Lino it yes, list names of all parties involved: CYOK Studios Inc., See atten contract		
If yes, is the contract/option contingent or absolute?		
☑Contingent		□Absolute
	Address of Subject Property: 38-06-2 Parcel ID Number(s): 38-06-2 Existing Use of Property: Vaca Future Land Use Map Designation: MU Proposed Zoning Designation: R Acreage: 8.71 LICANT Applicant's Status Name of Applicant(s) or Contact P Company (if applicable): Black Mailing address: 3900 Pase City: Green Cove Spring Telephone: (904 759-8930 If the applicant is agent for the pro Name of Owner (titleholder):): B&I Mailing address: 1 Indepen City: Jacksonville Telephone: () st provide executed Property Owner ITIONAL INFORMATION 1. Is there any additional contact for Silves Into If yes, list names of	Project Name: Proposed Multi-Family Develor Address of Subject Property: 1300 Energy Cove Coest Parcel ID Number(s): 38-06-26-016562-000-00 Existing Use of Property: Vacant Future Land Use Map Designation: MUH Existing Zoning Designation: MUH Existing Zoning Designation: R3 Acreage: 8.71 LICANT Applicant's Status

D. ATTACHMENTS

- 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.)
- 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

Commission # GG 961616 My Commission Expires March 03, 2024

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 contain	ned herein is true and correct to the best of my/our
knowledge:	
Signature of Applicant	Signature of Co-applicant
Colin D. Groff, P.E.	
Typed or printed name and title of applicant	Typed or printed name of co-applicant
7/12/2021	
Date	Date
State of Florida County of	Clay
The foregoing application is acknowledged before me this	
	who has/have produced
as identification.	
NOTARY SEAL	
Rembally Sees Signatu	re of Notary Public, State of <u>Plorido</u>
KIMBERLEY S. FARNSWORTH Notary Public-State of Florida	